Healthier Together
Improving health and care in Bristol, North Somerset and South Gloucestershire

NHS
Bristol, North Somerset and South Gloucestershire
Integrated Care Board

Bristol North Somerset and South Gloucestershire ICB Children in Care and Care Leavers Policy

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Policy ref no:	84
Responsible Executive Director:	Rosi Shepherd
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Date Approved:	7th April 2025
Approved by:	Shane Devlin, Chief Executive
Date of next review:	7th April 2028

Policy Review Checklist

	Yes/No/NA	Supporting information
Has an Equality Impact Assessment Screening been completed?	Yes	This is supported as an appendix to this policy
Has the review taken account of latest Guidance/Legislation?	Yes	There are several pieces of legislation and guidance documents that underpin the principles of safeguarding and children in care which are pertinent to the work of the ICB. These are listed on page 8.
Has legal advice been sought?	No	This is not required as it is a statutory function of the ICB to support the Local Authorities in their 'Corporate Parent.'
Has HR been consulted?	Yes	Yes, through Contract Policy Review Group
Have training issues been addressed?	Yes	Children in Care training is included in Safeguarding Children training. All ICB Staff are assigned a level of Safeguarding Children training that is relevant to their role and function.
Are there other HR related issues that need to be considered?	No	
Has the policy been reviewed by Staff Partnership Forum?	N/A	
Are there financial issues and have they been addressed?	N/A	
What engagement has there been with patients/members of the public in preparing this policy?	N/A	
Are there linked policies and procedures?	Yes	Safeguarding Children, Safeguarding Adults, Domestic Abuse, Prevent and the Mental Capacity Act.

	Yes/No/NA	Supporting information
Has the lead Executive Director approved the policy?	Yes	This has been approved by the Executive Lead for Safeguarding Chief Nursing Officer Rosi Shepherd.
Which Committees have assured the policy?		Safeguarding Governance Group have offered guidance. Corporate Policy Review Group have also offered scrutiny.
Has an implementation plan been provided?	Yes	This will form part of the safeguarding implementation plan to raise awareness for 2025– 2027 see Appendices
How will the policy be shared with		This policy will be available via the BNSSG staff intranet and website. The updated policy will also be launched at HWGNFY and through the Voice Newsletter. It will be a public document.
Will an audit trail demonstrating receipt of policy by staff be required; how will this be done?	Yes	This is not required. All staff can access this policy via the Hub.
Has a DPIA been considered in regard to this policy?	Yes	This was discussed at the Corporate Policy Review Group and a separate impact assessment was not necessary at this time providing implications were clear (see below).
Have Data Protection implications have been considered?		Schedule 3, Parts 1 and 5 of the Data Protection Act 2018. Supports that in cases where safeguarding concerns relate to children and adults at risk, organisations are not obliged to give access to information, respond to a request to delete information or inform individuals that their data is being processed if it is deemed that to do so could cause harm or prevent a safeguarding referral. Organisations should make reference to the Data Protection Act 2018 exemptions and the exemptions that are available in Article 23 and Chapter IX of the GDPR in their safeguarding procedures. This is also supported by two Information Sharing Agreements across the system. One

	Yes/No/NA	Supporting information
		a Tier 1 agreement and another Tier 2 which references why and how the system shares safeguarding information.

Version	Date	Consultation
BNSSG ICB Children in Care Policy v1	16th May 2023	CPRG
BNSSG ICB Policy Children in Care v2.1	16th April 2024	Reviewed by Nicki Ayres Proofread by AR
BNSSG ICB Children in Care Policy v3	5th June 2024	Final Review by Head of Safeguarding
V4	Jan 2025	Following comms edits- last proof read before sign off

1 Introduction

In England and Wales, the term 'looked after children' is defined in law under the Children Act 1989. A child is looked after by a local authority if he or she is in their care or is provided with accommodation for more than 24 hours by said authority.

Feedback from children in care is that the term 'Looked After Child' does not reflect the unique nature of their care status as all children are 'looked after' in some way, but not necessarily by the state. Some children find the term 'Looked After Child,' often abbreviated to 'LAC,' as offensive or derogatory as it infers that they are "lacking" in some way. Further feedback from children relates to their preference to be referred to as children first, before referencing that they are in care.

Children in Care (CIC), Looked After Children (LAC) or Children Looked After (CLA) are all terms which refer to Children and Young people, aged up to 18 years of age in the care of their local authority. For the purpose of this document the term Children in Care & Care Leavers (CIC & CLs) will be used. A Care Leaver is defined legally as a child who has been in the care of a local authority for 13 weeks or more on or after their 16th birthday and is entitled to extra support until the age of 25.

Children in Care and Care Leavers from 0-25 years are known to have health inequalities when compared with the non-looked after population (DoH 2015). Children in Care specifically is also a population for whom there are specific issues regarding consent and communication.
Children in Care fall into four main groups:

- Children who are accommodated under voluntary agreement with their parents (section 20)
- Children who are the subject of a care order (section 31) or interim care order (section 38)
- Children who are the subject of emergency orders for their protection (section 44 and 46)
- Children who are compulsorily accommodated. This includes children remanded to the local authority or subject to a criminal justice supervision order with a residence requirement (section 21).

The term 'looked after children' includes unaccompanied asylum-seeking children, children in regulated friends and family placements and those children where the agency has authority to place the child for adoption.

It does not include children who have been permanently adopted, subject to a Special Guardianship Order (SGO) or are privately fostered. Private fostering is when a child under the age of 16 (under 18 if disabled) is cared for by someone who is not their parent or a 'close relative'. This is a private arrangement made between a parent and a carer, for 28

days or more. Close relatives are defined as stepparents, grandparents, brothers, sisters, uncles, or aunts; whether of full blood, half blood or marriage/affinity.

Children and young people in care share many of the same health risks as their peers, often however, to a greater degree. Poor health prior to entering the care system and past experiences of poverty, abuse and neglect can be to blame but too often these greater needs can remain unmet, with many children and young people continuing to experience significant health inequalities. Leaving care does not signify an end to these difficulties and, sadly, poor health, education and social development may be a lifelong issue.

Research and guidance relating to Children in Care emphasises the importance of assessing their emotional health and wellbeing. Almost half of Children in Care have a diagnosable mental health disorder and two-thirds have special educational needs. Delays in identifying and meeting their emotional wellbeing and mental health needs can have far-reaching effects on all aspects of their lives, including the chances of reaching their potential and leading happy and healthy lives as adults (DoH 2015).

Professionals should work collaboratively with partner agencies to address any health inequalities and promote high quality care to ensure that children and young people achieve their full potential. Partner agencies as Corporate Parents should have high aspirations for Children in Care and seek to secure the best outcomes for these children and young people.

1.1 BNSSG ICB Values

This policy has been written with due regard to the ICB's values combined with safeguarding arrangements to uphold a strong ethos of partnership working. It aims to promote safety and optimal outcomes for our children and young people within the BNSSG population.

2 Purpose and scope

This policy applies to all members of staff working within NHS BNSSG ICB who are involved in any aspect of care, or commissioning of Children in Care and Care Leavers services. It is likely that Children in Care and Care Leavers will also be seen at out of hours services, A&E and Hospital Trusts where BNSSG have commissioned services. The purpose of this policy outlines the key responsibilities the ICB has in relation to this cohort of individuals. It also enables staff to understand the legislative statutory duties in relation to Corporate Parenting.

3 Duties – legal framework for this policy

The hyperlinks below are key pieces of legislation which underpin this work programme.

Legislation (CiC)
Children Act 1989 (2004)
Adoption Agencies Regulations (2005)
Adoption Act and Children Act (2002)
Promoting the health and wellbeing of looked after children (statutory guidance – 2015)
Children and Families Act (2014)
Children and Social Work Act (2017)
Care Planning, Placement and Case Review Regulations (2010) Children Leaving Care Act (2000)

Legislation	
The Crime and Disorder Act 1998 Female Genital Mutilation Act 2003 Sexual Offences Act 2003 Mental Capacity Act 2005 Convention on the Rights of Persons with Disabilities 2006 Mental Health Act 2007 Children and Families Act 2014	Modern Slavery Act 2015 Serious Crime Act 2015 Mental Capacity (Amendment) Act 2019 NHS Constitution and Values (updated Aug 2023) Domestic Abuse Act 2021 Serious Violence Duty - Statutory Guidance 2022
Safeguarding children	**Safeguarding young people transitioning into adults, including children in care**
United Nations Convention on the Rights of the Child 1989 Children Act 1989 and 2004 Promoting the Health of Looked After Children Statutory Guidance 2015 Children and Social Work Act 2017 Working Together to Safeguard Children Statutory Guidance 2023	

Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff 2019	Looked After Children: Roles and Competencies of Healthcare Staff 2020

Definitions

Children in Care and Care Leavers (LAC/CLs):

Children in Care: Those children and young people who are subject to a legal order by which the local authority has gained shared parental responsibility (e.g. Interim care order, full care order, placement order) or who have been voluntarily accommodated by the local authority under section 20 of the Children Act (2002).

Care Leavers: "Any adult who spent time in care as a child (i.e. under the age of 18). Such care could be in foster care, residential care (mainly children's homes), or other arrangements outside the immediate or extended family. If they are 16 years or above when leaving care, they are entitled to additional support under the Children Leaving Care Act (2000).

Parental responsibility is defined in Section 3(1) Children Act 1989 as: "all the rights, duties, powers, responsibilities and authority which by law a parent of a child has in relation to the child and his property". Whilst the law does not define the details of parental responsibility, a key role is agreeing to the child's medical treatment.

Corporate Parenting: Corporate Parenting refers to the duty and responsibility held by the local authority to collectively act as good parents in the best interests of the Children in Care and Care Leavers. The Corporate Parenting role extends from strategic commissioning at senior levels to the actions of all local authority workers and workers in the local authority's partner agencies (health, education, housing, police, etc). BNSSG ICB is represented at the relevant Boards by the Designated Nurse Children in Care and Care Leavers, or a delegated, responsible deputy.

Unaccompanied Asylum-Seeking Children (UASC)
These are children and young people who are seeking asylum in the United Kingdom but have been separated from their parents or carers. While their claim is processed, they are cared for by a local authority. These children are deemed as being 'in need' and thus the local authority has a legal duty (gateway) to assess such children and do so under Section 17 of Children Act 1989. This section imposes a general duty on local authorities to safeguard these children.

4 Responsibilities and Accountabilities

The Safeguarding Accountability and Assurance Framework 2024 sets out clearly the safeguarding roles and responsibilities of all individuals working in providers of NHS-funded care settings and NHS commissioning organisations which includes the ICB.

ICBs are the major commissioners of locality health services and need to assure themselves that the organisations from which they commission have effective and robust arrangements in place to safeguard children and young people and promote their welfare, in particular Children in Care and Care Leavers. The ICB are duly obliged to have a Designated Nurse for Children in Care (and the post in this ICB includes for care leavers – a group who are highly vulnerable due to their past and current life experiences). The role of the Designated Nurse for Children in Care and Care Leavers is to provide advice on monitoring of elements of contracts, service level agreements and commissioned services to ensure the quality of provision for children in care. The role is described in the Intercollegiate Guidance- Looked After Children Looked After Children: Roles and Competencies of healthcare staff 2020 and is a strategic leadership post. In addition to this the ICB is also required to have access to a Designated Doctor to work alongside the Designated Nurse on this work programme. The Doctor provides specific clinical expertise on complex cases involving children in care and/or care leavers.

Whilst the legal principles of corporate parenting only relate to the local authority, as a system partner BNSSG ICB has a duty to collaborate in corporate parenting and so should have a lead officer, usually director level with responsibility for children and children's services. In BNSSG ICB this is the Chief Nursing Officer.

The ICB, as part of its corporate parenting duties must make sure that it supports the Care Leavers strategy via the elements which support better health outcomes for this group of children, including young adults. The Government's strategy for Care Leavers is still relevant here Children's social care reform accelerates with more support for care leavers - GOV.UK. The Designated Nurse will inform the ICB of any updates, changes to this and the possible implications for the ICB and relevant staff.

Specific Roles in Relation to Children in Care

Chief Executive

The Chief Executive of the ICB has definitive accountability for ensuring that the health contribution to children in care and care leavers is discharged effectively through ICB commissioning arrangements. Part of this will be by ensuring that children in care receive an initial health assessment within 20 working days of coming into the care of the local authority.

ICB Board

The ICB Board will hold the Executive Lead for Safeguarding and Children in Care, who is the Chief Nursing Officer, to account on how as an organisation the ICB is ensuring that children in care are being offered timely health assessments and treatment to prevent further trauma and risk of harm. This will be achieved through the effective commissioning of specific children in care health services and collaboration between system partners.

Outcomes, Quality and Performance Committee

The Outcomes, Quality and Performance Committee will provide scrutiny to the delivery of the ICB Safeguarding Team's work programme through quarterly reports and seek assurance on how the ICB's statutory duties for safeguarding are being fulfilled. This will include how the ICB are contributing and supporting the local authority in their role of Corporate Parent.

Chief Nursing Officer

The Chief Nursing Officer is the Executive Director holding ICB Board level responsibility for Children in Care and contributing to the work of the Corporate Parenting Board for each Local Authority within the BNSSG area. Their role is to oversee safeguarding and governance systems including the leadership of any changes. This postholder works closely with the Health Partner Chief Nurses, Executive Directors in Local Authorities and the Police, supporting progressive development to improve safeguarding practice within and across the health community and wider system. The CNO is supported in this role by the Deputy CNOs who act as Delegated Safeguarding Partners and attend Corporate Parenting Boards on behalf of the ICB as needed.

Head of Safeguarding (All Age)

The Head of Safeguarding (All Age) provides leadership and support across the broad safeguarding agenda encompassing Children, Children in Care, Adults, and other safeguarding workstreams specific to ICB statutory duties for example, Violence against Women and Girls, Serious Violence Duty, Modern Slavery/Human Trafficking and Prevent to name a few. Therefore, with the support of the ICB Safeguarding team, this postholder will also lead the implementation of this policy. This post holder will also have oversight of the ICB Safeguarding training compliance for the organisation and be responsible for training provision. In addition, the postholder will have responsibility for receiving Annual Reports from our Health NHS Partner organisations within BNSSG each year as evidence of meeting their statutory and contracted safeguarding responsibilities. The Head of Safeguarding with their team will ensure liaison with wider ICB and ICS groups responsible for commissioning and assuring the safe delivery of services for Children in Care and Care Leavers to support effective strategic decision making.

Designated Nurse for Children in Care and Care Leavers

The Designated Nurse for Children in Care and Care Leavers provide expert clinical, strategic leadership to Executive leads, ICB Board members, senior managers,

commissioners and staff within the ICB to ensure that safeguarding standards are upheld and monitored across all health care providers across BNSSG. The Designated Nurse for Children in Care and Care Leavers will have additional expertise in this area as well as safeguarding.

The Head of Safeguarding will ensure the appointment of the Designated Nurse for Children in Care and Care Leavers is compliant with the Safeguarding Accountability and Assurance Framework 2024, and that their roles and responsibilities are clearly identified within relevant job descriptions - with reference to the Looked After Children: Roles and Competencies of healthcare staff 2020. The ICB must also ensure that this postholder is compliant with the training required for their role. Further details are below under Section 5.

In addition to the above, the Designated Doctor for Children in Care will work alongside the Designated Nurse to provide expert, strategic leadership for this work programme.

ICB Safeguarding Team

The ICB Safeguarding Team are accessible and available to the organisation to provide advice and support to colleagues within the ICB, GPs and Practice staff, as well as to other health staff across BNSSG ICS as required. Please contact the safeguarding team via bnssg.safeguardingadmin@nhs.net.

Responsibilities of ICB Employees

All ICB staff will be able to recognise where there is a safeguarding concern about a child in care or care leaver and respond appropriately; BNSSG ICB staff will: -

- Understand their responsibility in the management of a child in care or care leaver where a safeguarding concern has been identified- please refer to the Safeguarding Children and Safeguarding Adult policy for the details on how to make a referral.
- Access and follow the agreed safeguarding procedures.
- Comply with the ICB's mandatory safeguarding training requirements, as per the BNSSG ICB Training Matrix and commensurate to role as per national guidance (Intercollegiate Document, RCN, 2019).
- Support the organisation's role in raising awareness of safeguarding issues.

5 Training Requirements

The ICB is committed to having arrangements in place to ensure there is effective Children in Care and Care Leaver training included in the safeguarding children and adults training for all staff. The ICB expects all staff to be trained in children's and adults' safeguarding commensurate with their role and in reference to the relevant intercollegiate documents.

A safeguarding training matrix exists to provide clarity and support to this expectation. All ICB staff members are required to undertake either Level 1 or Level 2 Safeguarding Adults and Safeguarding Children courses on ConsultOD as part of their statutory mandatory

training; this is dependent on the directorate in which they work within. All ICB staff in the Chief Nursing Office Directorate are required to undertake Level 2 ConsultOD packages commensurate with their function and teams within which they work as a minimum. Safeguarding will also be included in any new ICB staff member's induction, as per the new starter checklist.

The Intercollegiate Guidance documents below provide reference to roles and responsibilities which may be patient facing, for example Funded Care, Continuing Health Care Teams, key worker roles within the Chief Nursing Office Directorate - these roles require postholders to undertake Level 3 training; this is included within the safeguarding training matrix. The compliance for this level training is also monitored via ConsultOD.

Intercollegiate Guidance; Safeguarding Children and Young People: Roles and Competencies for Health Care Staff (RCPCH 2019/2020)

Looked After Children: Roles and Competencies of Healthcare Staff

ICB staff compliance with safeguarding training will be monitored by their line manager and overseen by the People Directorate and ICB Safeguarding Team. Training compliance is also shared with the Outcomes, Quality and Performance Committee through the Safeguarding Reports. The Head of Safeguarding (All Age) will have full visibility of the compliance records. Persistent non-compliance with training will be reported to the Chief Nursing Officer and Chief People Officer and managed via the appropriate disciplinary policy.

The Head of Safeguarding (All-Age) will report on the Safeguarding Training compliance for the ICB through quarterly reports to the Outcomes, Quality and Performance Committee.

The safeguarding team provides safeguarding training to primary care professionals, specifically the Safeguarding Leads within GP Practices, for both children and adults safeguarding. Primary Care professionals are also directed and signposted to other resources to ensure that they are commensurate with the requirements clearly outlined in the Intercollegiate Guidance. This training also specifically includes principles and key aspects relating to Children in Care and Care Leavers.

6 Information Sharing

Staff should recognise that the sharing of information plays a vital part in ensuring that children and young people at risk are protected from abuse and neglect. Promoting children and young people's well-being and safeguarding them from significant harm is dependent upon effective information sharing. All employees are required to follow the HM Government Information Sharing: Guidance for

Practitioners and Managers (HM Government 2018) - Information sharing: advice for practitioners (publishing.service.gov.uk)

The ICB works collaboratively with other organisations and agencies to safeguard children, and the sharing of information is underpinned by the Tier 1 signed Information Sharing

Agreements which exist to support this process. Additional ISAs are in place to support the information sharing related to Multi Agency Safeguarding Hubs (MASHs).

Health professionals' organisations must provide information to the local authority / police when there are concerns about child abuse/potential child abuse.

All ICB staff employed or contracted are required to share and record information in line with the requirements of the:

Human Rights Act 1998

- Data Protection Act 2018 (and subsequent Data Protection Legislation)
- UK General Data Protection Regulation if want a date 2018.
- Information sharing: Guidance for safeguarding practitioners – (Gov 2018)
- Common Law Duty of Confidentiality

7 Golden Rules of information Sharing

The 7 Golden Rules are as follows:

1. Remember that the General Data Protection Regulation (GDPR), Data Protection Act 2018 and human rights law are not barriers to justified information sharing but provide a framework to ensure that personal information about living individuals is shared appropriately.

2. Be open and honest with the individual (and/or their family where appropriate) from the outset about why, what, how and with whom information will, or could be shared, and seek their agreement, unless it is unsafe or inappropriate to do so.

3. Seek advice from other practitioners, or your information governance lead, if you are in any doubt about sharing the information concerned, without disclosing the identity of the individual where possible.

4. Where possible, share information with consent, and where possible, respect the wishes of those who do not consent to having their information shared. Under the GDPR and Data Protection Act 2018 you may share information without consent if, in your judgement, there is a lawful basis to do so, such as where safety may be at risk. You will need to base your judgement on the facts of the case. When you are sharing or requesting personal information from someone, be clear of the basis upon which you are doing so. Where you do not have consent, be mindful that an individual might not expect information to be shared.

5. Consider safety and well-being: base your information sharing decisions on considerations of the safety and well-being of the individual and others who may be affected by their actions.

6. Necessary, proportionate, relevant, adequate, accurate, timely and secure: ensure that the information you share is necessary for the purpose for which you are sharing it, is shared only with those individuals who need to have it, is accurate and up to-date, is shared in a timely fashion, and is shared securely (see principles).

7. Keep a record of your decision and the reasons for it – whether it is to share information or not. If you decide to share, then record what you have shared, with whom and for what purpose

The law does not prevent the sharing of necessary information without consent if:

- The public interest in safeguarding the child or adult at risk's welfare overrides the need to maintain confidentiality
- Information is being shared to inform an assessment being undertaken by social care under section 47 & Children Act 2004
- Disclosure is required under a court order or other legal obligation

Professionals must always seek advice if they are in any doubt as to whether information needs to be shared. If a staff member is asked to make an official statement relating to safeguarding concerns to any outside agencies, they should seek support and advice from either their line manager, the Designated Safeguarding Professionals or the SCW Information Governance Service.

7 Safer Recruitment

The recruitment of ICB staff working directly with children or adults at increased risk of abuse will consider the need to safeguard and promote the welfare of children and young people and adults at risk. The ICB's recruitment policies and procedures which comply with relevant legislation and guidance must be followed. This includes arrangements for appropriate checks on new staff and volunteers including visits by fundraisers and celebrities (which the ICB may engage outside of normal recruitment practice). The ICB will ensure that managers have access to training in safer recruitment practices as appropriate this will be provided by the South, Central and West Commissioning Support Unit HR Team.

BNSSG ICB is committed to promoting a culture where employees can raise concerns about safeguarding issues and will be supported in doing so. This information is held on the internal intranet for staff and on the BNSSG ICB website.

Managing Allegations against staff, professionals or volunteers

The ICB should be informed, via the Designated Nurse Safeguarding Children (DNSC), when there are any allegations of abuse related to a child by an ICB staff member who is in a position of trust e.g. a patient facing allied health professional, registered professional

or clinician. The ICB should also have oversight of any allegations of abuse against children by health professionals working or volunteering in an ICB commissioned service. A concern may also be raised to the ICB Safeguarding by another safeguarding partner organisation if an ICB staff member or professional is behaving in a way which demonstrates unsuitability for working with children and young people at risk, in their present position, or in any capacity.

The allegation or issue may arise either in the employee's / professional's work or private life. If the allegation relates to a child, it is the role of the DNSC to inform and ensure the Local Authority Designated Officer (LADO) is informed within one working day of the allegation being made.

If the allegation relates to a member of staff working within the ICB, the case will be managed by Disciplinary Policy and Procedure, supported by the Head of Safeguarding (All age). If the allegation is against a GP, it should be directed to NHS England with the support of the Named GP.

In addition to the above, a regional procedure is in place to manage any allegation of abuse to children and/or adults by a person in a position of Trust. This is addressed in a separate policy and by each Safeguarding Children Partnership through the ICB's Designated Nurse Safeguarding Children as above.

Please see these links for more information:

If the safeguarding concerns for the person in a position of trust relate to the care of a child or young person, please contact the Local Authority Designated Officer (LADO).

Bristol: https://bristolsafeguarding.org/children/lado-concerns-about-professionals/ South Gloucestershire: http://sites.southglos.gov.uk/safeguarding/children/i-am-a-professional/managing-allegations/
North Somerset: https://nsscp.co.uk/professionals-practitioners/managing-allegations

Staff can be confident that allegations will be dealt with fairly and in line with the three BNSSG Safeguarding Children Partnerships arrangements and BNSSG ICB employment policy.

Freedom to Speak Up

Effective safeguarding practice for adults is underpinned by staff having full confidence to work within a culture of open practice. The BNSSG ICB Board fully endorses this through the current Freedom to Speak up policy and ICB Freedom to Speak up guardians.

Concerns may be raised about risk, malpractice or wrongdoing and may be exampled as, but not restricted to, issues of unsafe or poor patient care, poor working conditions and/ or bullying and suspicions of fraud.

8 Equality Impact Assessment

Name of Proposal being assessed: BNSSG ICB Children in Care Policy 2025-2027

Does this Proposal relate to a new or existing programme, project, policy or service?
This is an existing policy.

Lead Officer completing EIA	Faye Kamara
Job Title	Head of Safeguarding (All Age)
Department/Service	Chief Nursing Directorate
Telephone number	07423 813696
E-mail address	faye.kamara@nhs.net
Lead Equality Officer	**Samantha Hill**
Key decision which this EIA will inform and the decision-maker(s)	Approval of: BNSSG ICB Safeguarding Policy 2025 - 2027

Please see Appendices on page 15 for full details of the Equality Impact Assessment, also please see separately the attached screening tool.

9 Implementation and Monitoring Compliance and Effectiveness

The policy sets out how, as a commissioning organisation, BNSSG ICB will fulfil its statutory duties and responsibilities for safeguarding including Children in Care and Care Leavers both within its own organisation and across the local health economy via its commissioning arrangements.

Policy implementation and ICB staff mandatory training will be monitored and reviewed by the Head of Safeguarding (All Age) with support from commissioning and contracting leads and the Wider ICB Safeguarding Team.

When commissioning services, the ICB will use safeguarding standards in contracts for all providers, and where necessary and appropriate references to Children in Care and Care Leavers for example Dental contracts. The standards are informed by legislation, statutory guidance and research evidence. The ICB will seek assurance that these standards are met via the Quality Schedule (Safeguarding section) and contract monitoring undertaken

by the ICB. Health Partner Organisations will submit an annual safeguarding report to their own board and a copy of this will be sent to the Head of Safeguarding (All Age) which is required and aims to provide assurance of compliance with these standards.

This Children in Care and Care Leaver policy has been revised to reflect the new ICB arrangements and will be reviewed bi-annually thereafter. This document is one of a suite of Safeguarding Policies. Others are Safeguarding Children, Safeguarding Adults, Domestic Abuse, Prevent, and Mental Capacity Act.

10 Countering Fraud, Bribery and Corruption

The ICB is committed to reducing fraud in the NHS to a minimum, keeping it at that level and putting funds stolen through fraud back into patient care. The ICB recognises that our ICB Staff could be at risk of counter fraud due to their role within the organisation and safeguarding concerns might occur simultaneously.

Any safeguarding incidents involving financial abuse or raising any suspicions of fraud, bribery or corruption will be reported to the ICB's Local Counter Fraud Specialist for advice, investigation or onward referral to the police.

11 References, acknowledgements, and associated documents

Children Act 1989 (2004)
Children Leaving Care Act (2000)
Adoption Agencies Regulations (2005)
Adoption and Children Act (2002)
Promoting the health and wellbeing of looked after children (statutory guidance – 2015)
Children and Families Act (2014)
RCPCH Intercollegiate Guidance – Roles and Competencies for Looked after Children (2020)
Children and Social Work Act (2017) – section 3.
Care Leavers Covenant (2018)
Care Leavers Strategy. HMSO (2013)
Care Planning, Placement and Care Review Regulations (2010)
Kinship care and Special Guardianship: what it is and what it means | CoramBAAF

12. Appendix

Equality Impact Assessment

Updated EIA please also see separate EHIA screening tool for more information.

Equality Impact Assessment

Bristol North Somerset South Gloucestershire ICB Children in Care and Care Leavers Policy

Introduction

Healthier Together partners must discharge the Public Sector Equality Duty by ensuring that all 'policies' including commissioning decisions, policy, service design and practices do not directly or indirectly discriminate against individuals with one or more protected characteristics outlined in the Equality Act 2020. They are age, disability including physical and mental impairment, gender reassignment, marriage and civil partnership, pregnancy and maternity, race including nationality and ethnicity, religion or belief, sex, sexual orientation.

Everybody has the right to live a life free from abuse and neglect and this right is actively promoted by Bristol North Somerset South Gloucestershire (BNSSG) Integrated Care Board (ICB) as it commissions safe, effective and high-quality services for its population of people, with particular duties to those patients who are less able to safeguard themselves.

1. What are the main aims, purpose and outcomes of the policy?

The aim of this policy is to outline how NHS Bristol North Somerset and South Gloucestershire Integrated Care Board (BNSSG ICB) will fulfil its statutory duties and responsibilities in relation to children in care and care leavers, and to safeguard and protect the welfare of all children and young people living in the BNSSG area. This is to ensure that no act or omission on the part of the services commissioned by BNSSG ICB puts a child or young person inadvertently at risk. The Policy operates in the context of all commissioned services for the population of Bristol, North Somerset and South Gloucestershire both within its own organisation and across the local health economy via its commissioning arrangements.

Working Together to Safeguard Children (2023) and the Wood Review (2016) reinforce the recommendations and statutory requirement for multiagency Safeguarding Partnership working between Local Authorities, Health and the Police in providing best outcome based safeguarding practice to children and communities in each ICB population in the UK.

BNSSG ICB is a statutory partner of the Corporate Parenting Boards of the 3 local authorities aligned to BNSSG. They also link with and to the Partnerships as outlined below.

The BNSSG Safeguarding Children Partnerships are the Keeping Bristol Safe Partnership, the North Somerset Safeguarding Children's Partnership and the South Gloucestershire Safeguarding Children's Partnership.

All NHS and NHS funded organisations who support or offer services to children in care or care leavers, are expected to participate fully with the Corporate Parenting Boards and Safeguarding partnerships and, as a commissioner, the ICB uses contractual mechanisms to reinforce and monitor this requirement. Members of the BNSSG ICB Safeguarding Team, namely the Designated Nurse for Children in Care and Care Leavers where possible, attend and represent the ICB on all the Partnership's groups / subgroups within each of the three BNSSG safeguarding partnership structures.

This policy specifically supports the ICB safeguarding team members, and all staff employed by the ICB to comply with safeguarding legislation, codes of conduct and behaviours required as an ICB employee, when working either individually or in partnership with its partner agencies, in delivering their statutory safeguarding responsibilities and duties for the whole BNSSG population. This ensures that all ICB employees are able to support the delivery of safeguarding best practice at all times and that the BNSSG population receive high quality safeguarding interventions that meet the legal and statutory safeguarding guidance and regulations.

The policy describes the legal framework relating to safeguarding children and young people; definitions of abuse for children; roles, responsibilities and accountabilities; it sets out the training requirements and how employees should report abuse and describes the inter-related Human Resources (HR) policies that should be read in conjunction with this policy.

2. Does this Proposal relate to a new or existing programme, project, policy or service?

The policy is a new policy which is required by ICBs under the 2022 NHS Safeguarding Accountability and Assurance Framework.

3. If existing, please provide more detail

The policy provides a clear outline of definitions, legislative frameworks, roles and responsibilities within the ICB relating to Children in Care and Care Leavers.

4. Outline the key decision that will be informed by this EIA

The key decision informed by this EIA is that BNSSG ICB will give equal priority to keeping all children and young people safe and provide safeguarding interventions to the whole population across BNSSG ICB area regardless of their age, disability, marital status, gender reassignment, pregnancy status, race, religion or belief, sex, or sexual orientation.

5. Does this proposal affect service users, employees and/or the wider community?

The policy takes a whole-population approach with intention to benefit all residents across the Bristol, North Somerset and South Gloucestershire area. This includes people employed by Bristol, North Somerset and South Gloucestershire Integrated Care Board and those within the services and organisations it commissions.

Whilst most of the BNSSG population will not require child protection or safeguarding interventions and services, some people and communities may experience greater vulnerability in their lives resulting in safeguarding needs. This includes people with a history of abuse or neglect as a child, physical or mental illness or disability, family crisis or stress, unemployment, financial disadvantage, homelessness, family isolation, young people in or leaving local authority care and those who have experienced inadequate parenting skills. These vulnerability factors may result in members of the population being at higher risk in their lives of experiencing physical, emotional, sexual, financial abuse and neglect, domestic violence and abuse, sexual exploitation and child sexual exploitation, female genital mutilation, modern slavery, terrorism and criminal involvement or exploitation. All of the above are also factors in children becoming looked after by the local authority.

6. Could the proposal impact differently in relation to characteristics protected by the Equality Act 2010?

Assess whether the Service/Policy has a positive, negative or neutral impact in relation to the Protected Characteristics.

- ***Positive** impact means reducing inequality, promoting equal opportunities or improving relations between people who share a protected characteristic and those who do not*
- ***Negative** impact means that individuals could be disadvantaged or discriminated against in relation to a particular protected characteristic*
- ***Neutral** impact means that there is no differential effect in relation to any particular protected characteristic.*

The policy has a positive impact in relation to the nine protected characteristics in that it has been developed to provide a clear process, commissioning and policy framework for the ICB, to fulfil its legal duty to safeguard and promote the welfare of children and young people in line with section 11 of the Children Act 2004.

Definitions of harm and abuse include behaviours defined as harassment under the Equality Act 2010: “Unwanted behaviour related to a protected characteristic that has the

purpose or effect of violating a person's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for them."

People have fundamental rights contained within the Human Rights Act 1998. Health services have positive obligations to uphold these rights and protect people who are unable to do this for themselves.

The policy gives due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity and to foster good relations between people who share a relevant protected characteristic (as cited in the Equality Act 2010). The policy and procedures will not discriminate, either directly or indirectly, on the grounds of the 9 protected characteristics (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation). Care leavers are more likely to be discriminated against solely due to being care experienced, and while not currently supported by the Government, local authorities and their partners are working towards supporting the notion that those who have been care experienced and/or a care leaver should have a degree of protection in line with those of the Equality Act (2010).

The policy is consistent in its approach regardless of the 9 protected characteristics. In particular, the Children Act 2004 states that race, religion and culture must be considered when working with children.

NHS bodies have a statutory duty to ensure that they make arrangements to safeguard and promote the welfare of children and young people, to protect those at risk from abuse or the risk of abuse and support the Home Office Counter Terrorism strategy CONTEST, which includes a specific focus on PREVENT (preventing violent extremism / radicalisation).

This Policy sets out the collective and individual expectation for BNSSG ICB staff to comply with legislation, codes of conduct and behaviours required as an employee of BNSSG ICB. The policy describes the definitions relating to Children in Care, Care Leavers, Corporate Parenting and Unaccompanied Asylum Seeking Children.

The table below provides details of each of the protected characteristics, risks and the mitigations considered in the policy:

Characteristic	Positive	Negative	Neutral	Risks	Comment/ Mitigations
Age	X			No risks identified by application of this policy	The policy applies to all people and therefore is consistent in its approach regardless of age.
Disability	X			No risks identified by application of this policy; however, raising	This policy is consistent in its approach regardless of any disability

				staff awareness regarding vulnerable groups is important	
Gender reassignment	X			No risks identified by application of this policy	This policy is consistent in its approach regardless of gender reassignment
Race	X			No risks identified by application of this policy; however, raising staff awareness regarding vulnerable groups is important	This policy is consistent in its approach regardless of race. In particular, the principals of the Children Act states that race, religion and culture must be taken into account when working with children.
Religion or belief	X			No risks identified by application of this policy; however, raising staff awareness regarding vulnerable groups is important	This policy is consistent in its approach regardless of religion and belief. In particular, the principals of the Children Act state that race, religion and culture must be considered when working with children.
Sex	X			No risks identified by application of this policy	This policy is consistent in its approach regardless of sex.
Sexual orientation	X			No risks identified by application of this policy	This policy is consistent in its approach regardless of sexual orientation.
Pregnancy and Maternity	X			No risks identified by application of this policy	This policy is consistent in its approach regardless of pregnancy and maternity
Marriage and Civil Partnership	X			No risks identified by application of this policy	This policy is consistent in its approach regardless of marriage or civil partnership status
Carers				No risks identified by application of this policy	The policy applies to all people and therefore is consistent in its approach regardless of a person's role in caring for others.

General	X			Risks: Staff lack awareness of policy Staff need to know what action to take Staff not confident to speak up Gaps in data	Opportunities: • Internal promotion of policy • Safeguarding training that encompasses Children in Care and Care Leavers • Clear procedures for reporting concerns • Campaign to promote all routes to Speaking Up in ICB People Plan action plan • Safeguarding Annual report and LeDeR reviews inform policy change • To identify safeguarding health inequality data with Population Health Management team to support future policy updates

Does the policy relate to an area with known health inequalities?

The policy is aimed at providing safeguarding information and guidance, relating to children in care and care leavers, for all ICB staff to consider when working with the whole population of BNSSG. Health of the population is generally good across BNSSG but there are recognised health inequalities and key challenges and opportunities for improving the health of children, young people and adults particularly in areas of high deprivation. For example, deprivation is a key factor in childhood obesity and BNSSG has a higher level of childhood obesity than the Southwest as a whole, so that by the age of 11, nearly 1 in 3 of the children in BNSSG weigh more than is healthy. In addition, Bristol has an increasingly diverse population with children from BME backgrounds, growing at a rate of 28% on a background of 10% across BNSSG. BAME communities in the UK are more likely to be diagnosed with mental health problems and to experience a poor outcome from treatment.

Please provide reasons for your answer and any mitigation required

The CIC and Care Leavers policy provides clear definitions relating to Children in Care, Care Leavers, Corporate Parenting and Unaccompanied Asylum Seeking Children. The policy also underpins all of the safeguarding statutory legislative frameworks.

Under-18s are only protected against age discrimination in relation to work, not in access to services, housing, etc. Children's rights are protected by several other laws and treaties, such as: The Children Act; the Human Rights Act 1998; the UN Convention on the Rights of the Child; the European Convention on Human Rights; the UN Convention on the Rights of Persons with Disabilities; and the UN Convention on the Elimination of Discrimination against Women.

Relevance to the Public Sector Equality Duty - Please select which of the three points are relevant to your proposal. There is a general duty which requires the system to have due regard to the need to:

7. Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010?

Does this proposal address risk in relation to any particular characteristics? (Yes)

The policy is designed to ensure all members of the population are safeguarded which supports practice recommended by the Equality Act 2010.

8. Advance equality of opportunity between people who share a protected characteristic and those who do not?

Will this proposal facilitate equality of opportunity in relation to particular characteristics? (Yes)

Please explain your reasons

The policy endorses safeguarding practice that aims to ensure that all members of the population are safe and that if safeguarding interventions are required that these are in line with improving practice related to equality of opportunity.

The policy addresses risk of harm of abuse which is known to be of greater risk to people identified for protected characteristics. It also advances equality of opportunity between people who share a protected characteristic and those who do not.

As children in care and care leavers form part of and are covered by our safeguarding duties all this is relevant to this policy as well as the safeguarding children policy.

9. Foster good relationships between people who share a protected characteristic and those who do not.

Will this proposal foster good relationships between one protected group and another or between one group and the organisation? (Yes)

Please explain your reasons:

The policy aims to ensure all members of the population are safe. In doing this it promotes equality and equity for all individuals in the protected characteristics eliminating unlawful/unjustifiable discrimination and harassment and advancing equality by:

- Fostering positive relationships between diverse groups of people, thereby
  - Improving community cohesion
  - Promoting positive attitudes towards disabled people, including positive actions to help people with protected characteristics overcome disadvantage.
  - Involving people in decisions regarding their health and social care, and their access to services.

Is a FULL Equality Impact Assessment required?

(Consider the size of the population or cohort, the risk to patient, the likelihood of disproportionate impact of the policy on one or more protected characteristics, any lack of insight into the needs of the communities or their barriers; or risk to the organisation's reputation or relationships – this should influence your decision)

No

Assessment of this policy indicates that this policy will not disadvantage any particular groups or discriminate unlawfully. The implemented policy will advance equality through robust commissioning framework to ensure providers meet their Safeguarding obligations.

The positive impact of the policy is that it has been developed to provide a clear process, commissioning and policy framework for the ICB to fulfil its legal duty to safeguard and promote the welfare of children and adults in line with section 11 Children Act 2004.

Appendix 2 Corporate Policy Implementation Plan

BNSSG ICB Safeguarding Policy (Revised 2025/27)

Policy Owner: Faye Kamara, Head of Safeguarding (All age)

Target Group	Implementation or Training objective	Method	Lead	Target start date	Target End date	Resources Required
All ICB Staff	Raise awareness of revised Safeguarding Policies to all staff And ensure that this is also shared as a standalone policy	Input on Revisions and importance of Safeguarding at 'Have we got news for you'	Faye Kamara and Designated Team	March 2025	May 2025	None
All ICB Staff	Work with Comms to ensure they are cited on safeguarding	Share calendar of safeguarding campaigns with Comms and work on ICB messaging	Band 5 Safeguarding Coordinator	March 2025	April 2025	None

	campaigns organised for the year with partnerships					
	Develop a set of CIC and CL bitesize training slides	These have already been rolled out to GPs at SG awareness sessions. Feedback will be used to support continuous improvement of the pack.		Jan 2025	Jan 2025	None