

**Safeguarding Six Monthly Update Report
Trust Public Board
26 March 2026**

Presented for:	Information and Assurance
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Previous Committees:	Quality Assurance Committee 19 February 2026

Link to Strategic Objective	Focus on care quality, effectiveness and patient experience
Link to Provider Capability Assessment	Governance, risk and regulatory
Link to CQC Well-led Statement	Governance, Management and Sustainability
Regulatory Impact	Regulation 13: Safeguarding service users from abuse and improper treatment

Key points	Purpose
1. This report provides a six-month update on the Trust's safeguarding position (Q1–Q2 2025/26), confirming continued compliance with statutory safeguarding duties and national standards.	Information and Assurance
2. The report summarises the current safeguarding landscape across children's safeguarding, adult safeguarding, Prevent and Mental Capacity, highlighting emerging risks, system pressures, and mitigating actions to ensure a resilient and robust safeguarding framework.	Information and Assurance
3. The Trust Board is asked to: - Receive the six-monthly safeguarding update and be assured that LTHT continues to meet its statutory safeguarding duties and national standards. - Note the current safeguarding position, including emerging themes, increasing complexity and areas requiring ongoing oversight. - Acknowledge improvements achieved during the reporting period, including strengthened safeguarding referral quality and enhanced multi-agency engagement. - Support continued prioritisation of safeguarding objectives over the next six months, including strengthened horizon scanning, governance review and proactive risk management. - Recognise that although no safeguarding risks currently require Board escalation, continued scrutiny and effective governance remain essential within a complex and evolving system environment.	

<u>Risk Appetite Framework</u>			
Level 1 Risk	Level 2 Risks	(Risk Appetite Scale)	Impact
Clinical Risk	Patient Safety & Outcomes Risk - We will provide high quality services to patients and manage risks that could limit the ability to achieve safe and effective care for our patients.	Minimal	Moving Towards
External Risk	Regulatory Risk - We will comply with or exceed all regulations, retain its CQC registration and always operate within the law.	Averse	Moving Towards

1. Summary

This report provides a six-month strategic safeguarding update (Q1–Q2 2025/26) following the 2024/25 Annual Safeguarding Report presented to Trust Board in July 2025.

Safeguarding remains a clear organisational priority. The Trust continues to meet its statutory duties under the Children Act 2004, Care Act 2014 and Mental Capacity Act 2005. Governance arrangements remain robust and no safeguarding-related patient safety incidents have been reported against the National Priorities set out within the Trust Patient Safety Incident Response Plan during this reporting period.

However, the safeguarding landscape is increasingly complex. Demand, acuity and case complexity continue to rise across both adult and children's safeguarding activity. Despite these pressures, the Trust remains compliant, engaged and influential within safeguarding partnerships locally and regionally.

Wider health and social care system capacity pressures are contributing to delayed discharges, and prolonged hospital stays for some vulnerable patients, including those awaiting specialist mental health placements or community care packages. Extended lengths of stay can increase safeguarding vulnerability, including risks of deconditioning, self-neglect and loss of independence, while also exacerbating operational pressures within acute services. These interdependencies require continued system-wide oversight and partnership escalation.

Key risks requiring ongoing oversight include:

- Sustainability of the A&E Navigator Service beyond March 2026.
- Continued system-wide delays in Deprivation of Liberty Safeguard (DoLS) authorisations
- Increasing staff-related safeguarding activity impacting service capacity
- Ongoing rise in children and young people safeguarding complexity and mental health crisis presentations.

Emerging NHS system reform and potential changes to safeguarding commissioning and assurance arrangements.

Over the next six months the Trust will maintain clear prioritisation of safeguarding objectives, strengthen horizon scanning and forward planning, and ensure governance and capacity remain resilient. This approach provides assurance through proactive risk management and robust oversight, rather than reassurance based solely on current compliance.

2. Alert, Advise, Assure Executive Summary

ALERT – *Alert to matters that require the Board visibility and oversight.*

- Increasing safeguarding complexity and demand, including a 25% year-on-year rise in domestic abuse cases and a growing proportion of highly complex cases requiring sustained senior oversight.
- The Trust has seen an increase in safeguarding referrals relating to children and young people (CYP), alongside increasing complexity of presentation. Emergency Department and ward teams are managing higher numbers of children and young people presenting in acute mental health crisis, including self-harm, suicidal ideation

and overdose. These presentations frequently require multi-agency safeguarding coordination in addition to Mental Health Act assessment.

- Increasing numbers of patients presenting in acute mental health crisis, including patients requiring assessment and potential detention under the Mental Health Act. Prolonged Emergency Department waits may increase safeguarding risk.
- Children and young people with Special Educational Needs and Disabilities (SEND) remain disproportionately vulnerable to abuse, exploitation and unmet need. The Head of Nursing for Safeguarding provides strategic leadership for SEND across the organisation, ensuring oversight of safeguarding arrangements, assurance regarding reasonable adjustments and strengthened partnership working across health, education and local authority services. Continued Board visibility of this cohort remains important.
- Ongoing system capacity pressures impacting timely discharge and specialist placements, with associated safeguarding and quality risks.
- Potential closure of the A&E Navigator Service from March 2026 due to funding uncertainty. This risk has been formally recorded on the Trust Risk Register given the potential impact on safeguarding pathways for children and young people presenting to the Emergency Department.
- Ongoing system-wide Deprivation of Liberty Safeguards (DoLS) authorisation delays presenting inherent legal and assurance risks.
- Rising staff-related safeguarding concerns (30% increase) placing additional pressure on a reduced-capacity specialist team.
- Emerging NHS system reform potentially impacting safeguarding commissioning and assurance structures.

These pressures collectively present a sustainability and capacity risk requiring continued Board-level oversight.

ADVISE - *Advise of areas of ongoing monitoring or development or where there is negative assurance.*

- Robust governance in place to ensure oversight of safeguarding capacity, complexity and resource pressures, particularly in relation to staff-related safeguarding activity and system changes.
- Potential closure of the A&E Navigator Service from March 2026 due to funding uncertainty. This has been formally recorded as a risk on the Trust risk register, given the potential impact on safeguarding pathways for children and young people presenting at A&E. Contingency planning is in progress to mitigate risk and maintain statutory safeguarding responsibilities. The Board is invited to note the risk and its potential system-wide implications.
- DoLS risk formally recorded on the Trust Risk Register with established mitigation and oversight processes.
- Prioritisation of mandatory safeguarding training across the Trust to ensure required compliance of >80% is maintained and consistently achieved.
- Strategic SEND safeguarding oversight embedded through the Head of Nursing for Safeguarding.
- Proactive engagement with NHS England, ICB and Local Authority partners regarding system reform and discharge pressures.
- Full internal Safeguarding governance review is planned for 2026/27 to strengthen escalation clarity and ward-to-Board visibility.

- Review of team structure and capacity in response to rising complexity.

These actions will support continued statutory compliance while responding to evolving risk and complexity.

ASSURE – *Inform the Board where positive assurance has been achieved*

- Safeguarding at LTHT remains compliant, robust and strategically aligned. The Trust is meeting its statutory duties and there are currently no significant safeguarding risks requiring immediate escalation to the Board.
- The Trust continues to meet all statutory safeguarding duties.
- No patient safety incidents reported against the National Priorities set out in the Trust Patient Safety Incident Response Plan , in relation to Safeguarding during this reporting period.
- Mandatory safeguarding training compliance maintained at ≥80%; Prevent and MCA training fully compliant.
- Required Named and statutory safeguarding roles maintained.
- A Trust Internal Safeguarding Audit undertaken by PricewaterhouseCoopers LLP (PwC) in Q1 identified no significant risks and provided additional assurance regarding safeguarding governance arrangements.
- The Trust remains a highly engaged and influential safeguarding partner across Leeds and the wider region.

Over the next six months, the Trust will maintain clear prioritisation of safeguarding objectives, strengthen horizon scanning and forward planning, and review governance and escalation processes to ensure ward to board oversight and visibility, in addition the plan is to review team structure and capacity. This approach is intended to provide assurance through robust oversight and proactive risk management, rather than reassurance based solely on current compliance

3. Quality and Performance Implications

Safeguarding remains a core component of the Trust's quality and patient safety framework. The reporting period demonstrates continued compliance with statutory safeguarding responsibilities and internal governance arrangements. Safeguarding remains integral to the Trust's quality and patient safety framework.

While compliance remains stable, the reporting period demonstrates:

- Increased Children and Young People (CYP) safeguarding referrals.
- Growth in mental health-related emergency presentations.
- Increased acuity and complexity of Mental Health Act assessments.
- Greater proportion of cases requiring senior oversight and multi-agency escalation.
- Increased safeguarding complexity linked to discharge delays and system capacity constraints.

Patients presenting in mental health crisis are disproportionately affected by prolonged ED waits, heightening safeguarding vulnerability and clinical risk.

Performance against safeguarding indicators remains stable. However, workload intensity and complexity have increased and are subject to ongoing governance oversight through established committees.

SEND safeguarding arrangements are subject to strategic oversight to ensure reasonable adjustments and equitable care pathways.

4. Financial Implications

The Safeguarding report provides assurance that the Trust is meeting its statutory duties and there is no identified financial implication.

5. Risk

The Quality Assurance Committee provides effective oversight of the Trust's Safeguarding, Prevent, Mental Health and Mental Capacity arrangements through regular meetings, receipt of formal assurance reports, and exception monitoring. Compliance with statutory and regulatory requirements remains stable, supported by sustained mandatory training compliance and the absence of safeguarding-related enforcement action or statutory breaches during the reporting period.

There has been no material change to the Trust's risk appetite in relation to Level 2 risks. Safeguarding-related risks recorded on the Trust Risk Register continue to be actively managed with established mitigation and oversight processes.

No new high or extreme safeguarding risks have been identified. The Trust continues to operate within the Board-approved risk appetite for Level 1 external risks.

6. Improving Health Equity

Children and young people living in deprived communities are disproportionately represented in safeguarding referrals and mental health crisis presentations. Safeguarding activity recognises the intersection of poverty, housing instability, exploitation, domestic abuse and mental health vulnerability.

Children and young people with SEND face additional barriers to accessing timely support and are at increased risk of abuse and neglect. Strategic SEND oversight ensures safeguarding decision-making considers reasonable adjustments and equitable access to care.

Safeguarding interventions within Emergency Departments, maternity and acute settings have supported earlier identification of risk, particularly for those from areas of higher deprivation.

Multi-agency pathways including Multi Agency Risk Assessment Conference (MARAC) processes and contextual safeguarding processes have improved safety for individuals experiencing domestic abuse, exploitation or self-neglect.

Safeguarding governance continues to ensure that health equity remains embedded to ensure health equity remains embedded within decision-making and service delivery.

7. Publication Under Freedom of Information Act

This paper has been made available under the Freedom of Information Act 2000

8. Recommendation

The Trust Board is asked to:

- Receive this six-monthly update and be assured that LTHT continues to meet its statutory safeguarding duties and required national standards.
- Note the current safeguarding position, including emerging themes, areas of increasing complexity and key risks requiring ongoing oversight.
- Acknowledge the improvements achieved during this period, including improved quality of safeguarding referrals and enhanced multi-agency partnership engagement.
- Support the continued prioritisation of safeguarding objectives over the next six months, including strengthened horizon scanning, governance review and proactive risk management.
- Recognise that while no significant safeguarding risks currently require Board escalation, sustained scrutiny and effective governance are essential to maintaining compliance and organisational resilience in a complex and evolving system environment.