STANDARD OPERATING PROCEDURE
SAFEGUARDING TEAM - DUTY

Document Reference	SOP24-029
Version Number	1.0
Author/Lead **Job Title**	Helen Young Specialist Safeguarding Practitioner
Instigated by: **Date Instigated:**	Kate Baxendale October 2023
Date Last Reviewed:	26 March 2024
Date of Next Review:	March 2027
Consultation:	Safeguarding Forum
Ratified and Quality Checked by: **Date Ratified:**	Safeguarding Learning and Development Forum 26 March 2024
Name of Trust Strategy / Policy / Guidelines this SOP refers to:	

VALIDITY – All local SOPS should be accessed via the Trust intranet

CHANGE RECORD

Version	Date	Change details
1.0	*Mar 2024*	*New SOP. Approved at Safeguarding Learning and Development Forum (26 March 2024). EIA completed 1 May 2024 then sent to Policy Management for formatting and intranet upload.*

Contents

1. INTRODUCTION

The Safeguarding Team within Humber Teaching NHS Foundation Trust provides safeguarding support, advice, and guidance to all staff. As part of this service the Safeguarding Team operates a duty system which all staff can access.

2. SCOPE

This procedure sets out the processes to be followed by all members of the Safeguarding Team.

3. DUTIES AND RESPONSIBILITIES

Admin Duty Procedures

1. The Administration Team will ensure that there is a standard message in the Safeguarding Team email in-box that makes it clear that the team does not accept any mental health referrals and directs staff to appropriate services.

2. The Safeguarding Administration Team will provide duty cover between the hours of 9am – 5pm Monday to Friday.

3. The Safeguarding Team can be contacted on the team email: hnf-tr.safeguardinghumber@nhs.net

4. The Safeguarding Administration Team will have regular oversight of the team in-box and will allocate the tasks to the appropriate practitioner.

5. All emails for the duty practitioner to be copied and pasted over to the Safeguarding Database folder. The email should then be renamed with date and time of receipt in front of original subject title. If an email is urgent, the renaming should include 'URGENT' as well as time and date. Once this has been actioned, the original email can be ticked in the team inbox and dragged and dropped/copied over to the email sub folder called 'datix/referrals/concerns'.

6. The Safeguarding Administration Team will copy and paste any non-urgent meeting invites to the 'meetings awaiting allocation' folder on the V drive for review/allocation by practitioners.

7. Any urgent meeting invites (i.e., if the meeting is due to take place before the next team meeting) will be placed to the 'safeguarding database' folder and marked as 'MEETING' followed by the day it will take place in capitals.

8. Requests for strategy meetings for Hull, and on occasion East Riding children will be logged by the Safeguarding Administration Team. If the Hull or East Riding 0-19 Team request a Safeguarding Practitioner to attend, the Safeguarding Administration Team will then consult with the Safeguarding Practitioners as to who, if anyone, can attend.

9. Missing children – please refer to Missing Standard Operating Procedure.

10. Notice of a child death – please refer to the Child Death Standard Operating Procedure.

11. On receipt of a request for information from Local Authority Safeguarding Team or other established information sharing contact, asking if a patient is known/open and to which team only, the Safeguarding Administration Team will check records to establish whether the patient is known to Humber Teaching NHS Foundation Trust, respond and create a datix.

When an email is received into the team inbox asking if a patient is known/open followed by clinical questions **admin will initially check to see if the patient is known** and then:

a. In the case a patient is not known, admin will respond stating patient is not known and create a datix.
b. In the case where a patient is known, admin staff will advise the inquirer that the email has been passed on to duty. The email will then be placed into the duty folder. It is then the duty practitioner's responsibility to respond to the Local Authorities query and create a datix.

4. SAFEGUARDING PRACTITIONERS: DUTY PROCESSES

1. The Safeguarding Team will provide practitioner duty cover between the hours of 9am – 5pm Monday to Friday.

2. The duty practitioner will review all items in the Safeguarding Database folder and prioritise responses, usually in chronological order unless marked urgent.

3. Any emails should be sent via the generic safeguarding team email. The duty practitioner should note in the duty file any attempt made to contact the staff member making contact, marking their initials and number of times contact attempted.

4. The practitioner attending meetings, such as VARM, Professionals Meetings, Seclusion Reviews etc should record their attendance on the meetings allocation spreadsheet, which is located under the Meetings Awaiting Allocation on the Safeguarding Database. An entry should also be made on the electronic patient record – this includes child safeguarding strategy meetings for which there is a set template.

5. If the meeting request does not contain appropriate information such as name of patient, date of birth and reason for meeting, then the duty practitioner will contact the person requesting the meeting for further information to support decision making as to attendance.

6. The duty practitioner should record all safeguarding contacts such as supervision and advice given on the Safeguarding Database.

7. There is no expectation that all duty requests will be dealt with by the end of the day, so on occasion it might be helpful for there a 'handover' between the duty practitioners to share any pertinent information that needs following up.

Appendix A: Equality Impact Assessment

For strategies, policies, procedures, processes, guidelines, protocols, tenders, services
1. Document or Process or Service Name:
2. EIA Reviewer (name, job title, base and contact details):
3. Is it a Policy, Strategy, Procedure, Process, Tender, Service or Other?

Main Aims of the Document, Process or Service
This document is aimed at Humber Teaching NHS Foundation Trust Safeguarding Practitioners who participate in the Safeguarding Duty Desk rota, which is operated Monday to Friday 09:00-17:00. This SOP is not applicable to staff outside of the Safeguarding Team.
Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma

Equality Target Group	Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?	How have you arrived at the equality impact score?
1. Age 2. Disability 3. Sex 4. Marriage/Civil Partnership 5. Pregnancy/Maternity 6. Race 7. Religion/Belief 8. Sexual Orientation 9. Gender re-assignment	Equality Impact Score Low = Little or No evidence or concern (Green) Medium = some evidence or concern(Amber) High = significant evidence or concern (Red)	a) who have you consulted with b) what have they said c) what information or data have you used d) where are the gaps in your analysis e) how will your document/process or service promote equality and diversity good practice

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Age	Including specific ages and age groups: Older people Young people Children Early years	Low	Little or no evidence that this SOP would impact this inequality target group
Disability	Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities: Sensory Physical Learning Mental health (including cancer, HIV, multiple sclerosis)	Low	Little or no evidence that this SOP would impact this inequality target group, where a person with a disability needs support with writing or recording duty contacts reasonable adjustments should be in place
Sex	Men/Male Women/Female	Low	Little or no evidence that this SOP would impact this inequality target group
Marriage/Civil Partnership		Low	Little or no evidence that this SOP would impact this inequality target group
Pregnancy/ Maternity		Low	Little or no evidence that this SOP would impact this inequality target group
Race	Colour Nationality Ethnic/national origins	Low	Little or no evidence that this SOP would impact this inequality target group

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Religion or Belief	All religions Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	Little or no evidence that this SOP would impact this inequality target group
Sexual Orientation	Lesbian Gay men Bisexual	Low	Little or no evidence that this SOP would impact this inequality target group
Gender Reassignment	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	Little or no evidence that this SOP would impact this inequality target group

Summary

Please describe the main points/actions arising from your assessment that supports your decision.   Little or no evidence that this SOP would impact this inequality target group. Where a person with a disability needs support writing and recording information such as safeguarding contacts, reasonable adjustments should be in place to support this.
EIA Reviewer: Helen Young

Date completed: 01/05/2024	Signature: *Helen Young*