

## Annual Reporting for Duty of Candour

**Submission Date: Sept. 2020**

**Submitted By: Caryn Nicolson and Ann McManus**

**Submitted To: Frontline Fife (FLF) Board of Trustees**

### 1. Purpose of the Report:

This report is submitted to FLF's Board of Trustees for approval and once formally accepted will be released via FLF's website for public access under the Health (Tobacco, Nicotine etc. & Care) (Scotland) Act 2016 and The Duty of Candour (Scotland) Regulations 2018.

### 2. About the Reporting Requirement:

As of April 2018, all organisations under the CI and SSSC are required to produce an annual report of their Duty of Candour (DOC) responsibilities even when no incidences occur within the reporting period.

### 3. Responsible Person(s):

This report has been drafted by FLF's Duty of Candour Responsible Person, Caryn Nicolson and Ann McManus, Lead for Short Term Housing Support and responsible person to the Care Inspectorate.

### 4. Reporting Period:

April 2019 to March 2020

### 5. Reporting of Incidences within the Year:

During the reporting year, there were no incidences reported which triggered the Duty of Candour process to be invoked. Table One below gives a summary of the number of incidences which occurred by reportable category.

*Table One: Reporting of incidences relating to clients within our care while present*

Type of unexpected or unintended incidents	Number of times occurred
Someone died <i>(NB It should be noted that some clients engaged with our services may die within their own tenancy/occupancy. Having consulted with the CI, we confirm that for deaths to be reported within this report, workers must be present. Therefore, it may be the case, that deaths may occur but not reported here.)</i>	The number of client deaths occurring while in our care while a worker is present was 1.
Someone has permanently less bodily, sensory, motor, physiologic or intellectual capacity	0
Someone's treatment has increased because of harm	0
Someone's life expectancy becomes shorter because of harm	0
Someone's sensory, motor or intellectual function is impaired for 28 days or more	0
Someone experienced pain or psychological harm for 28 days or more	0
A person needed health treatment in order to prevent them dying	0
A person needed health treatment in order to prevent other injury	0
Covid-19 Confirmed Positive Cases	0

## 6. Actions Taken within the Year:

In the previous year, FLF's Board of Trustees instructed a review of the charity's safeguarding measures. An internal audit was undertaken with recommendations made. Table Two below summarises the actions undertaken in the previous year and those taken within this reporting period.

*Table Two: Safeguarding Actions undertaken from April 1<sup>st</sup>, 2018 to March 31<sup>st</sup>, 2020*

Safeguarding Actions Undertaken	2018/ 2019	2019/ 2020
Named Responsible Person confirmed	•	
Formal procedures for DOC reporting drafted	•	
Review audit of related policies and practice to assess the robustness of current measures and identify further measures to assure safeguarding practices are in place	•	
Awareness training on DOC requirements and staff responsibilities	•	
Drafting of an overarching Safeguarding policy statement to accompany the development of a Safeguarding Framework		•
Safeguarding Policy & Practice Framework drafted		•
Formal reporting/ Safeguarding updates for Trustees		•
Further Safeguarding training attended by the DOC responsible person		•
CEO as a member of the Scottish Government's Homelessness Resilience working group, reviewed the reporting of deaths across homelessness services		•
Whistleblowing Policy updated and approved		•
Conflict of Interest practice guidance for staff drafted		•
Adult Protection Training/Retraining completed by all staff		•
Revised Client Risk assessment procedure implemented		•
Covid-19 Responsive Measures put in place (unplanned)		•

*What has changed as a result of practice?*

- Increased Awareness and Accountability: Regular Safeguarding reports are now submitted to FLF's Board Trustees.
- Professional Learning and Development: Awareness training/retraining on Safeguarding and DOC responsibilities and duties is now part of FLF's mandatory training programme.
- Procedures and Practice Improvement: Safeguarding is now formally part of FLF's continuous improvement programme.
- Service Resilience and Safeguarding: FLF's experience of managing services in a time of crisis (pandemic) will be reviewed to identify better and/or new approaches for client safety/safeguarding of vulnerable groups and the wellbeing of others, including staff.

## 7. Recommendations/Concluding Statements:

Further to the measures taken in 2018-19 towards improving our ongoing commitment to robust safeguarding practice, FLF fulfilled the actions planned for 2019-20.

At the end of February 2020, FLF also took responsive action to mitigate (as best possible) the risks associated with Covid-19 to protect clients, staff and the public under its Business Continuity plan. Divesting resources towards the charity's Covid-19 response in order to remain open to support vulnerable clients has to date, brought about significant change; intended and unintended.

FLF intends to review and reflect on this experience with a view to embedding and sharing what has been learned from what is often described as unprecedented circumstances. A summary report on FLF's Covid-19 response will be submitted to FLF's Board of Trustees in due course along with the action plan for 2020-21.

For information about this report contact Caryn Nicolson, CEO of Frontline Fife Homelessness Services (e) [caryn.nicolson@frontlinefife.co.uk](mailto:caryn.nicolson@frontlinefife.co.uk)