

## Annual Reporting for Duty of Candour

**Submission Date: Nov. 2021**

**Submitted By: Caryn Nicolson**

**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.

### 4. Reporting Period:

April 2020 to March 2021

### 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 safeguarding incidences relating to clients within our care while present. NB For all other client incidences recorded see FLF's H&S 2020-21 annual report.*

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 0
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 28days 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 Client Positive Cases	0

## 6. Actions Taken within the Year:

Table Two below summarises the actions undertaken within this reporting period.

Table Two: Safeguarding Actions undertaken from April 1<sup>st</sup>, 2020 to March 31<sup>st</sup>, 2021

Safeguarding Actions Undertaken	2020/ 2021
Covid-19 risk assessments and sector guidance reviewed in line with changes as directed by the SG. All protection measures for staff put in place and monitored regularly	•
Infection Control awareness online training and access to IC guidance in place for staff	•
Client Covid-19 Hygiene measures (distribution of PPE and cleaning products, Protection Guidance- door step campaign across client groups)	•
Online Assist Training offered when made available. There is limited access to this training for all agencies in Fife.	•
Adult and Child Protection training /retraining undertaken (training and retraining scheduled to maintain employee's current practice)	•
Draft Vulnerable Persons policy and training placed on hold until it is safe to undertake group face to face employee training. To be taken forward in 2021-22	x

*What has changed as a result of practice?*

- FLF is embedding a more robust system for notifying and reporting risk clients and incidences with all staff.
- There is greater awareness of the range of potential client risks/harm across all functions and better coordination of case reviews with partner agencies for those clients supported in temporary accommodation.
- In light of the pandemic, there is renewed commitment to review client safety/safeguarding of vulnerable groups and support the wellbeing of staff and others.

## 7. Concluding Statements/Recommendations:

Mitigating the risk of Covid infection across staff members and clients continued to be a priority focus of FLF's management team in 2020-21. Measures put in place at the end of the previous year, continued to be adapted and monitored up to the end of operating year in line with government directives. Consequently, resources continued to be divested to meet the protection measures and monitoring requirements expected and therefore, other activity was either deferred or adjusted accordingly.

It is recommended that a review of all safeguarding activity is undertaken in 2021-22 and an action plan be drafted to ensure FLF's safeguarding practices are maintained without overburdening managers and staff given the level of fatigue identified across the workforce at this time.

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)