



Bury

Clinical Commissioning Group

Safeguarding Children and Adults at Risk Annual Report

2017-18

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Introduction

The following report is the fifth safeguarding annual report of NHS Bury Clinical Commissioning Group (CCG) and its purpose is to provide assurance to both the CCG Governing Body and the public that NHS Bury CCG is meeting its statutory obligations to safeguarding children and adults at risk within the services it commissions.

The CCG meets its obligation via a wide range of activities including:

- Membership of the two local safeguarding boards, adults and children
- Assurance visits to key providers
- Quarterly NHS Bury CCG Safeguarding and Assurance meeting
- Completion of an annual audit of the Greater Manchester safeguarding contractual standards with a number of large and small providers of services to the population of Bury
- Supervision and support to health staff across the economy
- By working with the Local Authority and multi-agency partners
- The delivery of a training programme to colleagues in Primary Care
- Ensuring that the CCG meets the requirements of the NHS England Accountability Framework (2015), the Care Act 2014 and Working Together to Safeguarding Children 2015

The following report expands on all the above areas.

1. Statutory Responsibilities

In November 2015 the Governing Body ratified the NHS Bury CCG accountability framework for the new CCG, based on the statutory guidance and legislation in force at the time. As of April 2017, new guidance is awaited from the Department of Education and NHS England. The following section outlines how the CCG has fulfilled its obligations to both children and adults at risk of abuse during 2017-18. The accountability framework was updated and ratified by the Quality and Performance Committee of NHS Bury CCG in November 2017 and is available via the website.

1.1 Key Roles and responsibilities of the: CCG Governing Body, Clinical Chief Officer/Executive Governing Body Level lead as outlined in Section 11 of the Children Act 2004, NHS accountability framework 2015 and the Care Act 2014.

	Responsibility	Local arrangements	Lead	CCG position March 2018
1	A clear line of accountability for safeguarding, properly reflected in the CCG governance arrangements, i.e. a named executive lead to take overall leadership responsibility for the organisation's safeguarding arrangements	There will be an identified lead and clear governance arrangements (see appendix1)	The Executive lead for Safeguarding	
2	Clear policies setting out their commitment, and approach, to safeguarding including safe recruitment practices and arrangements for dealing with allegations against people who work with children and adults as appropriate	Policies will be updated as required to reflect new guidance and legislation and at an interval of no more than 3 years	Head of Safeguarding	Policies were updated and ratified in November 2017
3	Training their staff in recognising and reporting safeguarding issues, appropriate supervision and ensuring that their staff are competent to carry out their responsibilities for safeguarding	All staff will be aware of the policy and guidance and attend safeguarding training as outlined in the training strategy Training figures will be reported to the	Deputy Director of Business Delivery and Head of Safeguarding	Staff training was compliant with 80% of staff completing their mandatory training and

		Governing Body via the safeguarding dashboard All job descriptions will reflect safeguarding responsibilities		the Governing Body completing a bespoke session In March 2018
4	Effective inter-agency working with local authorities, the police and third sector organisations which includes appropriate arrangements to cooperate with local authorities in the operation of LSCBs, SABs and Health and Wellbeing Boards	The CCG will have membership of all 3 boards at operational and strategic level. The CCG co-operates with DHR's SCR and with all agencies listed	Executive Lead for Safeguarding	
5	Ensuring effective arrangements for information sharing.	The CCG will have clear standards for information sharing within the safeguarding policy	Head of Safeguarding	Included in the CCG safeguarding policy available via the website
6	Employing, or securing, the expertise of Designated Doctors and Nurses for Safeguarding Children and for Looked After Children and a Designated Paediatrician for unexpected deaths in childhood	The CCG will have staff in place as required	Executive lead for Safeguarding	All statutory posts in position
7	Having a Designated Adult Safeguarding Manager (DASM) which should include the Adult Safeguarding lead role and a lead for the MCA, supported by the relevant policies and training.	The CCG will appoint and a DSAM who will also lead on adult safeguarding and MCA Safeguarding policy and MCA policy will be in place for the organisation	Head of Safeguarding	There is no statutory requirement for a DASM in the Care Act 2014 but as best practice the CCG employs a Designated Nurse for Adult Safeguarding who leads on MCA, Prevent and

				DOL's
8	Effective systems for responding to abuse and neglect of adults	The safeguarding policy will reflect the systems for responding to abuse and neglect of adults	Designated Nurse for Safeguarding Adults.	
9	Supporting the development of a positive learning culture across partnerships for safeguarding adults to ensure that organisations are not unduly risk averse	The CCG will have membership of strategic and operational Boards for Adult Safeguarding and provide support a challenge to health providers	Executive Lead for Safeguarding	Membership of MAPPA, Adult Safeguarding Board, Local Safeguarding Children's Board and the safeguarding networks across GM
10	Working with the local authority (LA) to enable access to community resources that can reduce social and physical isolation for adults	The CCG will work collaboratively with the LA to achieve the aim	Director for Commissioning	
11	CCG representatives at the LSCB must be accompanied by their Designated Professional to ensure their professional expertise is effectively linked into the local safeguarding arrangements	<p>The Designated Professionals are advisors to both the adults and children's safeguarding boards</p> <p>The CCG safeguarding policy will link with the LSCB and the ASB, the CCG will be a signatory to the policies of both Boards</p> <p>The CCG will have active membership of both the adult and children's safeguarding board plus the health and wellbeing board</p>	Executive Lead for Safeguarding	

12	Designated Professionals are responsible for undertaking serious case reviews/ case management reviews/significant case reviews on behalf of health commissioners and for quality assuring the health content	The CCG will contribute expertise to case reviews and quality assurance health providers' reports where appropriate.	Head of Safeguarding	
13	Designated Professionals must be consulted and able to influence at all points in the commissioning cycle to ensure all services commissioned meet the statutory requirement to safeguard and promote the welfare of children	The CCG will ensure that safeguarding is considered at all points of the commissioning cycle	Director of Commissioning	
14	Designated Professionals are responsible for providing expert advice to HEE, Local Education and Training Boards to ensure that the principles of safeguarding are integral to education and training curricula for health professionals	On request the Designated Professionals will support and provide advice to the listed organisations	Head of Safeguarding	
15	The Designated Professional must have direct access to the Executive (Board level) Lead to ensure that there is the right level of influence of safeguarding on the commissioning process	The Designated Nurse for Child Protection (Head of Safeguarding and other members for the team have direct access to the Chief Officer	The Chief Officer	The COO of the CCG meets regularly with both the Designated Nurses and are readily accessible when required
16	The CCG Accountable Officer (or other executive level nominee) should meet regularly with the Designated Professional to review child safeguarding	The Head of Safeguarding will have formal meetings quarterly with the Chief Officer of the CCG	The Chief Officer	
17	Specific responsibilities of	The CCG will have	Executive Lead for	

	<p>the DASM will include:</p> <ul style="list-style-type: none"> □ Responsibility for the management and oversight of individual complex cases. □ Coordination where allegations are made, or concerns raised about a person, whether an employee, volunteer or student, paid or unpaid □ Promoting partnership working and keeping in regular contact with their counterparts in partner organisations □ Assessing and highlighting the extent to which their own organisation prevents abuse and neglect taking place □ Ensuring that appropriate recording systems are in place that provide clear audit trails about decision making and recommendations in all processes relating to the management of adult safeguarding allegations against the person alleged to have caused the harm or risk of harm and ensure the control of information in respect of individual cases is in accordance with accepted data protection and confidentiality requirements <p>It is recommended that the DASM role also incorporates the safeguarding adult lead</p>	<p>in place a DASM role. The role will be undertaken by the Designated Nurse for Safeguarding Adults</p>	<p>Safeguarding</p>	
<p>18</p>	<p>CCGs are required to have a Designated MCA lead who is responsible for providing support and</p>	<p>The CCG will have in place a Designated MCA lead who will be</p>	<p>Executive Lead for Safeguarding</p>	

	<p>advice to clinicians in individual cases and supervision for staff in areas where these issues may be particularly prevalent and/or complex</p> <p>They should also have a role in highlighting the extent to which their own organisation, and the services that they commission, are compliant with the MCA through undertaking audit, reporting to the governance structures and providing or securing the provision of training</p>	<p>accountable to the Head of Safeguarding</p>		
19	<p>Under delegated arrangements, CCGs will be responsible for ensuring that the GP services commissioned have effective safeguarding arrangements and are compliant with the MCA. NHS England will require assurance that such arrangements are in place before CCGs take on such responsibility. The overall effectiveness of CCGs in discharging their safeguarding and MCA duties will also be monitored as part of the CCG assurance process</p>	<p>The CCG will comply with the NHS safeguarding accountability framework and will report annually via the annual report to the Governing Body and the public.</p> <p>Once delegated arrangements are in place the CCG will have in place a process to assure itself that GP services are effective</p>	<p>Head of Safeguarding</p>	<p>During 2017-18 all GP practices within Bury completed a self-assessment tool and engaged in meetings with the CCG safeguarding team. Where needed the practices developed an action plan</p> <p>The plans are to be reviewed in May 2018</p>
20	<p>Whatever arrangements are in place for securing the expertise of Designated Professionals it is vital that CCGs enable and support Designated Professionals to fulfil their system-wide role</p>	<p>The CCG will employ directly or via an SLA all Designated professionals as required</p>	<p>The Chief Officer</p>	<p>The Designated Nurses work across the GM health economy and support the safeguarding work via the networks</p>
21	<p>It is strongly</p>	<p>The CCG will</p>	<p>The Chief Officer</p>	<p>The CCG</p>

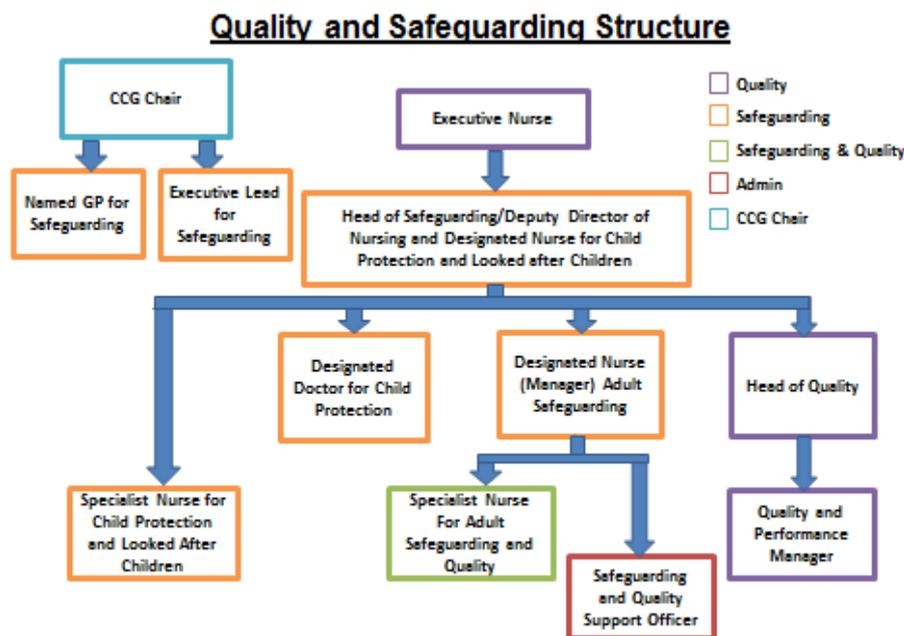
	<p>recommended that two Named GP sessions per 220,000 (population) is secured as a minimum. Broadly the role of the Named GP/Named Professional includes:</p> <ul style="list-style-type: none"> □ Providing specific expertise on child health and development and in the care of families in difficulty as well as children who have been abused or neglected □ Providing supervision, expert advice and support to GPs and other primary care staff in child protection issues □ Offering advice on local arrangements with provider organisations for safeguarding children □ Promoting, influencing and developing relevant training for GPs and their teams □ Providing input as a skilled professional to child safeguarding processes, in line with the procedures of Local Safeguarding Children Boards □ Taking a lead in writing the general practice components of serious case reviews, independent management reviews, SAAF, section 11 and multi-agency audits □ Supporting processes required by regulator unannounced and announced single and multi-agency inspections 	<p>employ a Named GP for safeguarding</p>		<p>employs a Named GP for 2 session per week</p>
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	<p>□ Working with commissioners to develop and improve the quality of safeguarding arrangements locally</p> <p>□ Supporting and encouraging collaborative working across the local safeguarding system with a particular role to work with the nominated safeguarding leads in GP practices</p>			
22	<p>Local Authorities (LAs) are held to account for the public health duties that are transferred to them, through local management structures and LSCBs/SABs in the usual way. They are able to access specialist support and advice via the CCG safeguarding team or the Safeguarding Forum</p>	<p>The Director of Public health will have access to the specialist support for the safeguarding team of the CCG</p>	<p>Head of Safeguarding</p>	

2. Governance

The Safeguarding Governance and Assurance Group are chaired by the Executive Lead for Safeguarding and meet quarterly. The main providers, Pennine Acute Trust, Royal Bolton Hospital maternity services, Pennine Care Foundation Trust and Bardoc Out of Hours Primary Care Services Provider; are expected to provide reports to each meeting in respect of a number of key areas including training figures. During 2017-2018, the GP Federation are included in the distribution list for information and attend by exception.

The group is accountable to the Quality and Performance Committee of the CCG and the committee receives quarterly reports via a safeguarding dashboard. The dashboard is available to the public via the Governing Body papers.



2.1 Assurance

During the last year, we have successfully built on the work of previous years. We continue to assure the providers who we commission to ensure that they provide good quality, safe services for the residents of Bury. This work includes working with large providers, such as Pennine Care Foundation Trust and Pennine Acute Trust, but, we also work with nursing and residential homes where Bury residents live.

All contracts with providers include a set of Greater Manchester safeguarding standards and the CCG via an assurance process works with a range of providers to establish the level of adherence to them. NHS Bury CCG is the lead commissioner for Pennine Acute Trust.

Pennine Acute Trust

NHS Bury CCG as the lead commissioner, works with Pennine Acute Trust (PAT), to evaluate their compliance with statutory guidance and best practice standards. At the end of Quarter 3

the CCG and PAT agreed the standards which were rated Amber (12 in total). The Amber relate to the capturing of data of the training of volunteers, MCA and DOL's is a carryover from last year and the numbers accessing training are increasing, and the new standards around Looked After Children.

The Trust appointed a new Head of Safeguarding in June 2017 and they have appointed two additional senior nurses. However, there was some long term sickness and a member of staff resigned. The new posts and the vacant post were filled and the post holder was in place, in addition to this the staff off with long term sickness returned at the beginning of Q4 which increased the capacity of the team.

During 2017-2018 two large Trusts, namely Salford Royal Foundation Trust and Pennine Acute Trust, began to align into one organisation, called the Northern Care Alliance Group. In line with the Northern Care Alliance Group model Pennine Trust and Salford Royal Foundation Trust safeguarding teams have amalgamated to provide safeguarding expertise across the four Care Organisations of North Manchester, Oldham, Salford and Bury and Rochdale. An action plan has been provided and will be monitored quarterly via the CCG safeguarding Assurance and Governance meeting The Trust is on target to meet the Prevent training standards by July 2018.

Pennine Care Foundation Trust

Heywood, Middleton and Rochdale (HMR) CCG lead on assurance on behalf of the NE Sector CCG's. There are some key lines of assurances which HMR CCG are exploring further with the provider and have generated an action plan. These include the development of a robust MCA policy and associated guidelines and pathways, Update of Privacy and Dignity Policy which has expired, tangible evidence of links to safeguarding boards.

NHS Bury CCG

NHS Bury CCG is required to provide assurance to NHS England via the safeguarding standards. In March 2018, the CCG were on Green for all standards.

The CCG achieved the target of 80% of staff being trained at Level 1, as required by the NHS Bury CCG training strategy, in safeguarding at the end of March 2018 but this remains a challenge with new starters and staff "timing out" on the 3 year cycle of training. The CCG submit a quarterly assurance to the Greater Manchester Health & Social Care Partnership and met with Head of Nursing from NHS England, no concerns were identified in the meeting.

Nursing Homes

The Safeguarding Team has worked alongside colleagues from other CCG's in Greater Manchester to devise a standardised assurance tool to assess the level of safeguarding understanding and compliance within the ten nursing homes in Bury. Joint visits were undertaken with the provider relationship officers at Bury Council. By March 2018 all the nursing homes in Bury had completed the document. Where some homes required on-going support with action plans to achieve full compliance this has been facilitated by the visiting team.

General Practice

During 2017/18 Safeguarding assurance visits were arranged with each of the 30 GP practices within Bury over a period of six months commencing in March 2017. The visits were completed by the Head of Safeguarding, the Designated Nurse for Adult Safeguarding and the Named GP. Visits were undertaken in a supportive manner and the key aims were to identify good practice which could be shared, identify gaps that required practice level support and gaps that may require a CCG response. The assurance visit to all the practices in Bury provides, along with the CQC ratings, a high level of assurance of engagement with the safeguarding agenda for both adults and children. All the practices welcomed the visits and took the opportunity to explore wider issues than the assurance tool. Occasionally, there were case discussions. The assurance visits need to be considered alongside high level of take up of the CCG safeguarding training and the regular contact with the team for advice on specific cases. Although, there were some points of learning, they did not reflect any unsafe practice. The visits were an opportunity to update on new initiatives, such as, the newly launched pathway for victims of domestic abuse and expand the knowledge of the practice staff.

In 2017-18, the safeguarding team within the CCG has undertaken assurance visits with a number of providers and the outcomes have been reported to the Governing Body. The organisations visited are listed below:

1. The Priory
2. Cygnet
3. Primary Care – GP's
4. Support and assurance visits to Bury Hospice
5. Small contract safeguarding policies reviewed conjunction with finance colleagues.

2.2 Supervision

The CCG safeguarding team provides clinical supervision and safeguarding supervision to a number of local providers who deliver care to vulnerable patients; this includes the PCFT team who support Military Veterans and senior staff working at Bury Hospice, Cygnet Hospital, Greater Manchester Mental Health Trust (Prestwich Hospital) and the Priory.

The Quality and Safeguarding forum for nursing homes meets every two months and promotes the sharing of ideas, good practice and a place to share challenges. Following on from last year's pilot, clinical supervision for registered nurses working in nursing homes is now part of business as usual and is being facilitated by Bury CCG Safeguarding Team. There has been increased interest by other CCG's and therefore the idea has been shared with GM Best Practice in Care Home Group.

Training

During 2017 to 2018, alongside our rolling training programme to Primary Care and other parts of the health economy we have delivered recognition and response to adult abuse and child protection. Additionally, we have delivered a range of training on a variety of topics, such as, Prevent (preventing radicalisation of vulnerable people), Neglect and the emerging concerns about modern slavery.

The team have delivered a range of training to trainee GP's, including child protection, Mental Capacity, Looked after Children and communication with safeguarding.

The newly appointed Specialist Nurse for Looked after Children and Child Protection has run workshops for GPs and Practice Nurses on meeting health needs of Looked after Children.

3. Partnership Working

3.1 React to Red

Following the launch of React to Red Initiative in March 2017 which aims to reduce the incidence of pressure ulcers and ultimately harm to our patients; a rolling programme of 4 cohorts has been completed during 17/18. A final cohort is planned for June 2018 which will then have captured all residential and domiciliary care providers.

3.2 Domestic Abuse

Another new initiative during 2016-17 was the development of a process for GP's and practice nurses to be provided rapid access to support for victims of domestic abuse. The CCG, working with the community safety officer from the LA and with the support of the Domestic Violence Steering Group, have launched a pathway which will enable victims of domestic abuse to contact support services and be seen in a safe place on the same day if required.

During 2017-18, as part of the assurance visits to GP practices, the team ensured the practices were aware of the pathway and this supported embedding of the new process. The Community Safety Partnership report an increase in referrals to Victim Support from health, although they are unable to differentiate the separate element of health, so it is not possible to validate a specific rise from practices.

The Community Safety Partnership (CSP) commissioned a Domestic Homicide Review in 2016 and this was published in 2017.

3.3 The CCG has worked with the CSP and was part of the membership of the review panel Adult and Children Safeguarding Boards

The CCG safeguarding team nurses support the work of the Adult Safeguarding Board by leading on safeguarding investigations where the CCG directly fund the care of the adult at risk and by providing advice and clinical expertise where the funding is led by the Local Authority. The Designated Nurse for Adult Safeguarding is a member of the Making It Happen and the CCG Head of Safeguarding is a member of case review group. Both Head of Safeguarding and Designated Nurse for Adult Safeguarding are members of NHS England regional forums i.e. MCA and FCM; which influences and challenges the work streams within

the NHS England Safeguarding. The Executive Lead for Safeguarding is a member of the Strategic Board and co-chairs the case review group.

The Executive lead for Safeguarding and the Designated Nurse for Child Protection are members of the strategic board for children. The Designated Nurse is a member of the business group, chairs the Case Review group and is the sponsor of the Quality Assurance sub group. The Designated Doctor is part of the membership of the Case review sub group.

There have been no serious case reviews during 2017-18 for either adults or children. Although there have been a number of local learning reviews. There have been no Domestic Homicide Reviews.

Greater Manchester Health and Social Care Partnership

The CCG safeguarding team supports the work of the GMH & SCP via membership of the four safeguarding networks (Adults, Children, Looked after Children and the Integrated). All four networks support the assurance processes across the GM health economy. In the autumn of 2017, the partnership disbanded the safeguarding collaborative, a central meeting hosted by NHS England. The designated professional decided to form an additional fourth network, the Integrated network which focuses on cross cutting themes. The Integrated network is chaired by the Head of Safeguarding from NHS Bury and included on its work plan the following:-

1. The development of a safeguarding assurance framework for Greater Manchester to support consistency of approach by CCG's to providers
2. The development of a template policy to support staff who are victims of domestic abuse
3. A safeguarding and training strategy for safeguarding for Greater Manchester
4. A induction checklist of newly appointed designated professionals
5. A supervision policy to support designated professionals

3.4 Priorities for 2018-19

1. Assurance across the health economy
2. Training and support to Primary Care
3. Implementing of the 'Red Bag' scheme to support safe transfers between care homes and acute hospitals
4. Supporting the changing landscape within Bury and GM
5. Supporting the integration agenda of the CCG and LA
6. To support the work of the Safeguarding Boards

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June 2018