

Meeting: Governing Body			
Meeting Date	28 July 2021	Action	Receive
Item No.	8d	Confidential	No
Title	Safeguarding Annual Report 2020/21 and Safeguarding Dashboard Q1 2021/22		
Presented By	Catherine Jackson (Executive Nurse, Director of Nursing & Quality)		
Author	Clare Holder Vanessa Woodall and Sophie Babb		
Clinical Lead	Dr Cathy Fines and Catherine Jackson		

Executive Summary
<p>The Safeguarding Children, Looked after Children and Adults at Risk Annual Report 2020/21 provides assurance to both the CCG Governing Body, NHS England, the local safeguarding partnership and the public that NHS Bury CCG is committed to meeting its statutory obligations to safeguard children, Looked after Children (LAC) and adults at risk within the services it commissions.</p> <p>The attached Safeguarding dashboard report outlines some of the assurance work completed by the CCG Safeguarding Team during Q1 2021/22.</p>
Recommendations
It is recommended that Governing Body receives the reports for information.

Links to CCG Strategic Objectives	
SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.	<input type="checkbox"/>
SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.	<input type="checkbox"/>
SO3 - To deliver improved outcomes through a programme of transformation to establish the capabilities required to deliver the 2030 vision.	<input checked="" type="checkbox"/>
SO4 - To secure financial sustainability through the delivery of the agreed budget strategy.	<input type="checkbox"/>
Does this report seek to address any of the risks included on the Governing Body Assurance Framework? If yes, state which risk below:	
GBAF	

Implications						
Are there any quality, safeguarding or patient experience implications?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
<i>If you have ticked yes provide details here. Delete this text if you have ticked No or N/A</i>						
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<p>< <i>If you have ticked yes, Insert details of the people you have worked with or consulted during the process :</i></p> <p>Finance (insert job title) Commissioning (insert job title) Contracting (insert job title) Medicines Optimisation (insert job title) Clinical leads (insert job title) Quality (insert job title) Safeguarding (insert job title) Other (insert job title)></p>						
Are there any conflicts of interest arising from the proposal or decision being requested?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
<p><i>If you have ticked yes provide details here. If you are unsure seek advice from Lisa Featherstone, Email - lisafeatherstone@nhs.net about the risk register.</i></p>						

Governance and Reporting		
Meeting	Date	Outcome
Quality and Performance Committee	14/07/2021	Received for information.

Safeguarding Children, Looked after Children and Adults at Risk Annual Report

2020-2021

Authors:

Clare Holder - Designated Nurse for Adult Safeguarding

Vanessa Woodall - Designated Nurse for Child Protection

Sophie Babb - Designated Nurse for Looked after Children & Care Leavers

June 2021

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Introduction

The following report is the eighth safeguarding annual report of NHS Bury Clinical Commissioning Group (CCG) and its purpose is to provide assurance to both the CCG Governing Body, NHS England, the local safeguarding boards and the public that NHS Bury CCG is committed to meeting its statutory obligations to safeguarding children, Looked after Children (LAC) and adults at risk within the services it commissions.

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

- Membership of the Bury Integrated Safeguarding Partnership (BISP) which was newly formed in September 2019
- Statutory partner in relation to strategic, borough wide safeguarding arrangements
- Assurance visits to key providers
- Completion of an annual audit of the Greater Manchester safeguarding contractual standards with several large and small providers of services to the population of Bury
- Completion of the NHS England CCG safeguarding assurance tool on a quarterly basis
- 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, Mental Capacity Act 2005 and Working Together to Safeguard Children 2018
- Participation in peer reviews, CQC inspections and Ofsted inspections
- Attendance at and contributions to Child Death Overview Panel (CDOP)
- Monthly monitoring of Looked after Children (LAC) Key Performance Indicators and escalation support as required

The following report expands on all the above areas.

Section One: 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. New guidance was issued by the Department of Education in 2018 (Working Together to Safeguard Children and a new accountability Framework in July 2019 by NHS England.

In response to the new guidance the NHS Bury CCG safeguarding team updated the following documents, which are available on the CCG website, following ratification by the Governing Body in January 2020.

- NHS Bury CCG internal Safeguarding Policy
- The NHS Bury Training Strategy
- Safeguarding Accountability Framework

Looked after Children:

The key statutory guidance "*Promoting the health and well-being of looked-after children: Statutory guidance for local authorities, Clinical Commissioning Groups and NHS England*" was updated in December 2020 and continues to clearly identify the responsibilities of the Local Authority and CCG's and provide the framework for practice in Bury. This includes the promotion of the child's physical and emotional health and acting on any early signs of health issues. To support our corporate parenting responsibilities in line with the statutory guidance, all of the strategies and actions undertaken within Bury are framed by the rhetorical question "*In whatever we do - would this be good enough for my own child?*"

To support this ethos further the recently updated "*Who Pays? Responsible Commissioner*" Guidance (Department of Health, 2020) is at the forefront of service development and sets to ensure that LAC have access to the same universal, targeted and specialist health services regardless of their legal status, placement type or placement stability and receive the same quality of services as children who are not looked after.

You can access the Quality and Safeguarding webpage via the below link for further information:

<https://www.buryccg.nhs.uk/your-local-nhs/plans-policies-and-reports/quality-and-safeguarding/>

1.1 Key roles and responsibilities of the CCG Governing Body, Clinical Chief Officer/Executive Governing Body Level Lead and NHS Accountability

No	Requirement from NHSE Framework	CCG Lead	Position March 2021
1	A clear line of accountability for safeguarding, properly reflected in the CCG governance arrangements, i.e. a named executive lead	The Chief Operating Officer has overall accountability, and this is delegated to the Executive Lead for Safeguarding	

	to take overall leadership responsibility for the organisation's safeguarding arrangements.		
2	Clear policies setting out the 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.	The CCG will have a current policy in place that is available to all staff via the website	
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	<p>Staff are accountable for their own training and their line managers for monitoring compliance</p> <p>Compliance will be reported quarterly to the Quality and Performance committee and to the Governing Body bi-annually. All staff are required to complete L1 training 3 yearly and within 3 months of commencing in the organisation</p> <p>December 2020 completed safeguarding training figures: Adults 80.8% Children 82.6%</p> <p>The safeguarding professionals access level 5 training.</p> <p>Learning from all case reviews is disseminated with front line staff via delivery of mandatory and bespoke training.</p>	
4	Equal system leadership between LA children's services, the police and the CCG is now required under the Working Together to Safeguard Children Statutory Guidance 2018	<p>The CCG is an equal partner within the Bury Integrated Safeguarding Partnership (BISP)</p> <p>The CCG is represented by the Executive lead, the Designated professionals and members of the safeguarding team on the various Boards and committees</p>	
5	Effective inter-agency working with LAs, the Police and third sector organisations, including appropriate arrangements to co-operate with LAs in the operation of safeguarding children's partnerships, Corporate Parenting Boards, SABs and Health and Wellbeing Boards	<p>AS above</p> <p>The CCG will have membership of the Bury Integrated Strategic Partnership at all subgroups and business groups of the BISP</p> <p>The Safeguarding team strive to develop and maintain professional, effective relationships with multi-agency partners</p>	

6	Ensuring effective arrangements for information sharing.	The CCG will share information as required and as outlined in the CCG safeguarding policy in line with GDPR and Information Governance, The Children Acts 1989, 2004, Working Together 2018 and The Care Act 2014	
7	Employing the expertise of designated professionals for safeguarding children, children in care, safeguarding adults and a designated paediatrician for Sudden Unexpected Deaths in Childhood (SUDIC).	The CCG will employ directly a Designated Nurse for Child Protection, a Designated Nurse for Looked after Children, a Designated doctor for Child Protection, a Designated Nurse for Adults and shares the employment of a SUDCI Designated doctor and a doctor for Child Death with HMR and Oldham CCGs, via commissioning from Pennine Acute Trust (PAT) The Designated doctor for Looked After Children is commissioned from PAT	
8	Effective systems for responding to abuse and neglect of adults.	The CCG will require all its providers to have systems in place to respond to abuse and neglect of adults. The CCG will support the LA where they are investigating abuse and neglect and health is an element The CCG will support the LA in cases where organisational neglect and abuse are known and suspected	
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 works with and supports its providers with risk management when safeguarding adults via the Serious Incident process and the work of the Bury Integrated Safeguarding Partnership (BISP)	
10	Working with the Local Authority to ensure access to community resources that can reduce social and physical isolation for adults	The CCG and the Local Authority will continue to work towards integrating their commissioning functions as One Commissioning Organisation which will support ensuring access to community resources for the population	
11	CCGs need to demonstrate that their designated professionals are involved in the safeguarding decision-making of the organisation, with the authority to work within local health economies to influence local thinking and practice.	The CCG will ensure that safeguarding is considered at all points of the commissioning cycle The CCG safeguarding team will work with the providers in respect of monitoring assurance of the safeguarding standards and support and challenge as required	

12	<p>For children in care, CCGs have a duty to cooperate with requests from LAs to undertake health assessments and help them ensure support and services to looked-after children are provided without undue delay</p>	<p>The CCG commission a service from a local provider to ensure that all children receive timely and quality health assessments</p> <p>This is monitored in respect of performance monthly and quality assurance is monitored via audits completed by the CCG safeguarding team and others in conjunction with the provider</p> <p>The outcomes will be reported annually to both the Governing Body and the Corporate Parenting Board via and this annual report which will be available on the CCG website</p>	
13	<p>CCGs should ensure that adult and children's services work together to commission and provide health services that ensure a smooth transfer for young people and children in care, including a planned period of overlap to avoid the abruptness of a sudden change in clinicians, culture, frequency of appointments and environment</p>	<p>Extensive work has been undertaken to support transition for care leavers, including a commitment to support the local Bury Care Leavers offer.</p> <p>A weekly drop in was provided by the Specialist Nurse pre pandemic restrictions and whilst not greatly utilised by care leavers, was promoted by health and Social Care staff alike. This has since changed to individualised support via Local Authority Personal Advisors and engagement is much more meaningful.</p> <p>A proposal for free prescriptions for Care Leavers was accepted by Bury CCG in late March 2021, with the aim to reduce barriers to accessing health and support. The offer will be implemented, working alongside our Local Authority colleagues early in the next financial year.</p> <p>Health Summaries are provided to all children leaving care just before their 18th birthday. These provide practical support in how to access health services and additional support as required, as well as useful information on previous vaccinations, illnesses, and investigations.</p> <p>Health are included in care planning and transition meetings to help identify on-going health needs and support transition to adult services as required. A notable gap was identified in how mental health services were commissioned in Bury for 16- and 17-year olds and transition to adult mental health services. As a result, a transition service has been commissioned to provide a method of screening newly referred young people and identifying the best route for further support and supporting transition for those already in service.</p>	

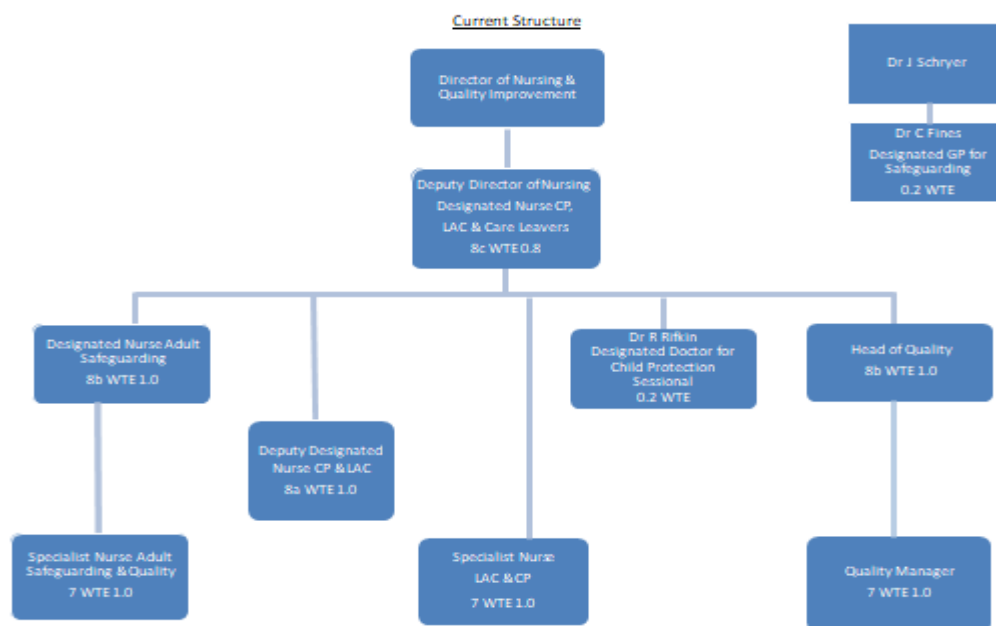
Section Two: Governance

The Safeguarding Governance and Assurance Group is chaired by the Executive Lead for Safeguarding and meets quarterly. The main providers, Pennine Acute Trust, Royal Bolton Hospital maternity services, Pennine Care Foundation Trust, Virgin Healthcare 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. Due to capacity issues within providers and commissioners during the COVID response this meeting was stood down. It has now recommenced in April 2021.

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.

The Designated Nurse for Looked after Children and Care Leavers attends Bury Corporate Parenting Board and provides regular updates regarding workstreams in relation to the health of children in care and care leavers in Bury to relevant strategic partners.

Structure as of the 1st April 2020



The above reflects the team structure in April 2020. During 2020/2021, and following retirement of a postholder within the team, the structure has changed and adapted. The post of Head of Safeguarding now sits with the Designated Nurse for Adult Safeguarding. The Designated Nursing posts for Child Protection and Looked after Children are now separate and as a result the Specialist Children's Nurse post has been disestablished. Additionally, the post of Specialist Nurse for Adult Safeguarding & Quality has been reviewed and regraded to reflect the additional responsibilities of this postholder.

2.1 Assurance

During the last year and the challenges of COVID, we have continued to build on the work of previous years albeit via virtual technology rather than in person meetings, visits and walk arounds in line with COVID restrictions. 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 (PCFT) and Pennine Acute Trust (PAT), however as a responsible host commissioner, we also work with nursing and residential homes where Bury residents live, and private hospitals within the locality.

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.

NHS Bury CCG

The CCG has in place a safeguarding policy, assurance framework and a training strategy and they are available on the CCG website. The figures for safeguarding training compliance for the organisation at end of Quarter 3 are Adults 80.8% and Children 82.6% against a target of minimum of 80%. This is an improvement on the previous year.

There is an executive lead in place and the safeguarding team has the appropriate staff in post.

Looked after Children

In addition to the wider safeguarding contractual assurance, which includes standards in relation to LAC; the CCG have continued to receive and monitor Key Performance Indicator (KPI) compliance monthly with the provider of our health of LAC services – Northern Care Alliance (NCA). Initially, negotiations were undertaken to allow for the restrictions and change in practice in response to the COVID pandemic, but since September 2020 all face to face appointments with children and young people have resumed and all children who received a virtual assessment in the prior period were offered a face to face follow up.

KPI compliance has remained above threshold throughout the year and is a testament to the handwork of the Health of LAC, Paediatric, School Nursing and Health Visiting teams. A breakdown of the quarterly figures can be found below.

Initial Health Assessments (IHA)

Quarter	Initial Health Assessments
Quarter 1	100% 42/42
Quarter 2	100% 28/28
Quarter 3	100% 36/36
Quarter 4	100% 30/30
Average for the year:	100% 136/136

The number of IHAs completed in the last 12 months has risen slightly from 130 to 136 and is in line with the slight increase in the number of LAC. Positively, 100% compliance has been achieved for the second year and all children who received a virtual health assessment have been offered a follow up face to face appointment.

Review Health Assessments (RHA)

Quarter	Review Health assessments under 5, resident in Bury	Review Health assessments over 5, resident in Bury	Review Health assessments under 5, not resident in Bury	Review Health assessments over 5, not resident in Bury
Quarter 1	26/26 100%	35/35 100%	5/5 100%	17/17 100%
Quarter 2	22/22 100%	44/44 100%	5/5 100%	11/11 100%
Quarter 3	18/18 100%	29/32 91%	14/14 100%	15/15 100%
Quarter 4	25/25 100%	37/38 97%	3/3 100%	13/13 100%
Average for the year:	91/91 100%	145/149 97%	27/27 100%	56/56 100%
	<i>(2019/20 – 100%)</i>	<i>(2019/20 – 97%)</i>	<i>(2019/20 – 91%)</i>	<i>(2019/20 – 94%)</i>

The figures above for out of area placements are corrected as per agreement between the CCG and NCA if a health assessment has not been completed within timescales for reasons beyond the provider team's control. The original figures are monitored, and every outstanding health assessment is reported within the subsequent monthly report until the assessment has been confirmed to have been completed. Due to a natural lag in paperwork processes often, out of area children may be reported in the figures as not completed as the paperwork has not yet been received back to the Bury LAC team and therefore completion has not yet been confirmed. Any issues with the completion of health assessments or return of paperwork are escalated to the Designated Nurse via the agreed escalation process.

The figures for substance misuse and Strengths and Difficulties Questionnaire screening are also collected and monitored and show continued good compliance.

General Practice

Throughout 2020/21 the Safeguarding Team have continued to deliver a programme of safeguarding training to Primary Care. Due to COVID restrictions these sessions were delivered via Microsoft Teams and it is interesting to note that attendance has increased as the training was more accessible. The sessions delivered included; Level 3 Adults and Children Safeguarding training; a focus on safeguarding in Primary Care during COVID which included challenges of virtual consultations; domestic violence, MCA and consent with an emphasis on swabbing and vaccination and learning from recent Serious Case Reviews (SCR), Local Child Safeguarding Practice Reviews (LCSPR), Serious Adult Reviews (SARS) and Domestic Homicide Reviews (DHR).

Practices have continued to support the safeguarding team in information gathering for reports that inform statutory reviews that the team are involved in via the work of the Bury Integrated Safeguarding Partnership (BISP).

Prevent training session was delivered in December 2020 with partners from Greater Manchester Police and was well attended with good feedback received.

The Safeguarding Team includes a Named General Practitioner (GP) for Safeguarding. The GP and Designated Professionals meet regularly to ensure new learning and themes that are emerging from on-going reviews are shared with colleagues in Primary Care in a timely manner.

Pennine Acute Hospital Trust

NHS Bury CCG leads the safeguarding assurance process on behalf of Oldham and Heywood, Middleton and Rochdale (HMR) CCG.

Greater Manchester (GM) Safeguarding standards are within all contracts and are agreed annually by the Designated Nurses for Safeguarding across GM, and locally, by the Quality and Performance committee.

The CCG safeguarding team meet at least quarterly with Pennine Acute Trust to review the standards and any action plan that is required. Pennine Acute Safeguarding Assurance using the 2020/21 tool continues to show improvements. Following the integration of community services and COVID, the cycle is now back on track and the action plan was reviewed at end of Quarter 4 2020/21 with considerable progress noted. There is increasing confidence from the CCG in terms of progress against the action plan quarter on quarter and engagement of the provider.

The CCG will continue to monitor via Quarterly Action plan Review Meetings and via the CCG Safeguarding Governance and Assurance Group in 2021/22.

Prevent

In addition to the safeguarding standards, there is separate reporting on the percentage of staff trained on Prevent within the Trust.

Compliance remained below trajectory at the beginning of Quarter 1 and had been raised with the respective Care Organisations (CO) for immediate attention. The Quarter 4 compliance data for Pennine Acute Trust/NCA was not available until May 2021 as an extension for submission has been granted to all until 21st May 2021 due to the vaccination programme, however compliance for the organisation now stands at 80% for L3 staff (formerly WRAP training) and 89.7% for Prevent Awareness which is above the minimum standard.

Pennine Care Foundation Trust

Heywood, Middleton and Rochdale (HMR) CCG lead on assurance on behalf of the CCG's within the Pennine Care footprint. The update from HMR CCG is as follows:

PCFT submitted their completed Contractual Safeguarding Standards at the end of Quarter 1 2020-21. The completed Tool was shared with Designated Nurses/ Professionals from across the footprint and an Action Plan to address Amber rated areas was agreed and monitored quarterly with the provider.

At the Quarter 4 meeting, on 16.04.2021, there were 16 Amber rated areas relating to the following areas:

- Safeguarding Audit Programme including Looked After Children, Mental Capacity Assessments, notification process to Children's Social Care for children in inpatient care for over 3 months, compliance with the principles of MCA and DOLs.
- Access to safeguarding supervision
- System for flagging adults in inpatient care with a Learning Disability/ Dementia
- Child Death Review (4 standards)
- Looked After Children Training in line with revised Intercollegiate Document
- Link to Corporate Parenting Board

Progress in all areas was acknowledged despite the challenges faced by the Covid 19 pandemic.

Cygnnet

Although Bury CCG do not currently directly commission a service from Cygnnet Bury, as the service is in our geographical area and houses vulnerable adults and young people it is good practice for us to build relationships and on behalf of GM and NHSE Specialist Commissioning include the provider in our annual safeguarding assurance programme. The GM Safeguarding Assurance Tool for non-NHS providers was completed in December 2019 with only one area rated amber and the rest rated green. This triangulates with the latest CQC inspection report for Bury, published in September 2020, which achieved Good overall.

The CQC did not plan to rate the hospital at this inspection as it was a focused inspection of the safe and well led key questions for two wards. However due to the inspection findings they have rated the core service as good. Due to the high number and appropriateness of adult safeguarding referrals, a multiagency panel has been created by bury CCG and Bury Council to review and quality assure the standard of referrals. The panel includes local authority strategic Safeguarding Manager, Local Authority (LA) Safeguarding Practice Consultant, and the CCG Designated Nurse for Adult Safeguarding and the Specialist Nurse for Adult Safeguarding and Quality. Once the panel have reviewed the referrals a meeting takes place between representatives from the panel and safeguarding leads within Cygnnet hospital. Feedback is given, and if required, further discussions take place. This process has been in operation since December 2020 and has already seen a positive building of relationships between LA, CCG and Cygnnet, a greater understanding by Cygnnet staff of appropriateness of their safeguarding referrals; and has established an effective route of communication. The local authority has reported a reduction in the number of referrals being submitted, however, importantly, the quality and appropriateness has improved. The meetings with the safeguarding leads from Cygnnet have created opportunity for open and honest discussions regarding the safeguarding arrangements at the hospital which adds to the overall assurance from the provider.

A six weekly meeting is also held between Child and Adolescent Mental Health Services (CAMHS) ward managers, the CCG and NCA Named Nurse for Safeguarding Children and LAC to review and monitor safeguarding concerns that have arisen from a children's perspective and provide advice and support as required. This also includes updates and monitoring of access to local Accident and Emergency services and children in long term seclusion.

Priory

The GM Safeguarding Assurance Tool for non-NHS providers was completed in December 2019 with all areas rated green. This triangulates with the latest CQC inspection report for Priory Bury, published in May 2019, which achieved Good overall.

Nursing Homes

The Safeguarding Team has worked alongside colleagues from other CCG's in Greater Manchester to review the GM standardised assurance tool which is used to assess the level of safeguarding understanding and compliance within the nine nursing homes in Bury. Partnership working between CCG, LA, CQC and Nursing Homes has continued through the COVID restrictions via MS Teams with sharing of safeguarding concerns and soft intelligence. The need for this dialogue became more evident as professional and family visits and therefore independent scrutiny were greatly reduced during this period. The Nursing Home Safeguarding and Quality Forum, chaired and facilitated by CCG Adult Safeguarding Team, also carried on via a virtual platform during 2020/21 due to COVID restrictions. A CQC representative also joined us during this period and is now a standing member of the forum. The forum proved another vital tool in 2-way communication with our nursing home colleagues during this challenging period and facilitated much needed and welcomed peer support.

Nursing Home Assurance Audit 2020/21

Although the CCG was conscious not to increase the burden on home managers during this challenging time by completing the audit, safeguarding remains a priority and there is recognition of the importance of maintaining standards. Discussions often allow the opportunity for support, therefore, with the agreement of the home managers, the assurance process proceeded. The circumstances of the COVID pandemic has offered an opportunity to trial a new approach to the assurance process in 2020/21. Using the revised standards document for 20/21 the process has been undertaken through self-assessment and reviewed via virtual meetings with the care home managers. Discussions were undertaken in a supportive manner, the key aims being to identify good practice, which could be shared with others; identify gaps that required local support and gaps that may require a CCG response. The discussions were also an opportunity to update on local and national initiatives, such as upcoming changes to the Deprivation of Liberty Safeguards process with the introduction of Liberty Protection Safeguards within the next 12-18 months.

The findings from this series of discussions showed continuing improvement from the visits in 2019 overall. This predominantly relates to individual improvement of homes. However, changes do occur regularly within the care home setting with a transient workforce and changes in situation. Within 2020 a total of four care homes either changed ownership and/or Home Manager. To add, the challenges of the COVID pandemic, have put increasing demands on the resilience of the care homes, the people who reside within them and the staff who are employed. Increased support has been offered by the local authority and the CCG. The recommendations from the report are:

- a) to arrange a review of the assurance document with the managers of the homes where the standards have not been met or partially met; and to continue to offer support to enable compliance with the standards. This may need to be undertaken virtually due to the ongoing impact of COVID pandemic.

- b) To recommence attendance assurance visits in cooperation with colleagues from the Provider Relationship Team as Government guidance allows. The visits will proceed in accordance with partnership working between the providers, the local authority, and the CCG, in order to ensure the line of sight remains with the residents who access the service.

Please find full report embedded below:



Report QP LW Final
2020-21.docx

Small Provider Assurance

Where Safeguarding concerns have been identified in relation to a small provider, NHS Bury CCG Safeguarding team have worked with those providers, in partnership with the CQC and other involved parties to ensure service users are safeguarded. This includes liaison with other Designated colleagues both locally, regionally and nationally.

Work has been undertaken to build on the initial assurance visits to all the children's care home providers and independent provisions within Bury and as such the Children's Provider Forum has been established. This has been well attended by Children's Homes and Semi-Independent Provisions in the area and have given opportunity to develop relationships further with such provisions. An example of where this has been particularly useful was following safeguarding concerns being raised regarding one of these provisions, who was then able to access appropriate advice and support via the CCG Safeguarding team.

2.2 Supervision

The CCG safeguarding team provides clinical supervision and safeguarding supervision to a number of local providers who deliver care to vulnerable and complex patients; this includes senior staff working at Bury Hospice, Cygnet Hospital, Greater Manchester Mental Health Trust (Prestwich Hospital), Virgin Healthcare, Sexual Health Services staff and the Priory. Safeguarding supervision is also provided for our Bury CCG clinical colleagues who work in the complex care team.

Designated Nurse for Safeguarding Adults meets on a regular basis with Associate Director for Adult Safeguarding at The Northern Care Alliance and Head of Safeguarding at Pennine Care Mental Health Trust, in line with the recommendations of the Intercollegiate Document 2018; Adult Safeguarding: Roles and Competencies for Healthcare Staff.

The Safeguarding and Quality Forum for Nursing Homes meets quarterly and promotes the sharing of ideas, good practice and to review safeguarding experiences within a peer supervision model.

The Designated Nurses for Child Protection and Looked after Children and their deputy meet regularly with the safeguarding team in the Northern Care Alliance to consider cases, in line

with the recommendations of the Children's and LAC Intercollegiate Documents (2019 & 2020).

The Designated Nurse for Child Protection offers formal and informal supervision to the Named Nurses 'on the patch' within The Northern Care Alliance and Pennine Care.

The Designated Nurse for Child Protection offers supervision to a specialist safeguarding nurse within Pennine Care.

All of the Safeguarding Team offer ad-hoc supervision and case management discussions to all health practitioners working across the borough.

2.3 Training

The Safeguarding Team continue to deliver a calendar of training to Primary Care in Bury, and on behalf of Health Education England to GP trainees across the North East Sector. In addition to recognition and response to adult abuse and child protection training, we have delivered a range of training on a variety of topics, including a focus on safeguarding in Primary Care during COVID and included challenges of virtual consultations, domestic violence, Prevent (preventing radicalisation of vulnerable people), MCA (Mental Capacity Act) and consent with an emphasis on swabbing and vaccination and learning from recent LCSPRs/SCR's/SARS/DHR.

Training is reviewed annually and adapted in response to local children's and adults learning reviews, thematic trends and individual practice needs.

Members of the team have provided regular input into the BISP Learning and Development subgroup, providing support to identify themes and trends within safeguarding reviews, helping to inform training needs. In addition, members of the team have provided support to the BISP training pool for specific training packages.

Bespoke safeguarding children training was also delivered to a cohort of doctors undertaking the MSc in Paediatric Anaesthesia by members of the CCG Safeguarding Team.

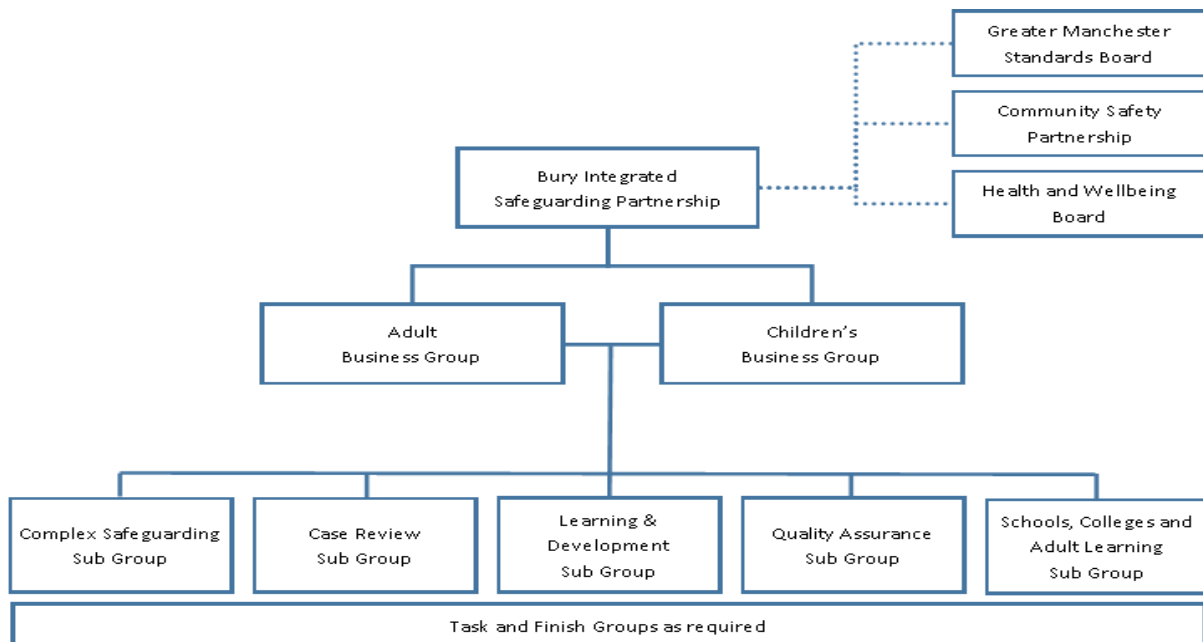
Section Three: Partnership Working

3.1 Multi Agency Safeguarding Arrangements

The three statutory Safeguarding Partners as set out in Working Together 2018 are the **Local Authority**, the **Clinical Commissioning Group** and the chief officer for the **Police**. They have a shared and equal duty to make arrangements to work together to safeguard and promote the welfare of all children in the local area. Bury's Integrated Safeguarding Partnership (BISP) has brought together the partners working with adults at risk and children.

The model in Bury was agreed and the CCG safeguarding team participated in its formulation. The aim is to reduce duplication via a Joint Strategic Board, for adults and children, and joint sub committees, while ensuring the voice of adults and children are maintained by having separate business groups for children and adults.

The CCG has membership at each level of the structure.



In September 2019, both the Bury Safeguarding Children Board and the Adult Safeguarding Board ceased to exist.

The arrangements were published and came into effect on the 29th September 2019

Another key element that changed was the arrangements for the Child Death Overview Panels (CDOP). The arrangements were the responsibility of the BSCB, but now are under the remit of the LA and the CCG. Bury are part of an arrangement with Rochdale and Oldham Clinical Commissioning Groups and Local Authorities. Locally, the governance is into the Health and Well Being Board.

The new arrangements for safeguarding and CDOP can be found at the following links:

<https://burysafeguardingpartnership.bury.gov.uk/CHttpHandler.ashx?id=20167&p=0>

<http://www.buryccg.nhs.uk/download/CDOP-BRO-June-2019.pdf.pdf>

Participation enables and supports the CCG to discharge its statutory duties as laid out in the Children Acts 1989 and 2004, and, the Care Act 2014.

3.2 Bury Integrated Safeguarding Partnership (BISP)

During 2020/21 the team have contributed to:

- **10 x Child Rapid Reviews**
- **1 x Local Child Safeguarding Practice Reviews (LCSPR)**
- **2 x Serious Adult Reviews (SARs) and the screening of a further 2 cases that did not meet criteria.**
- **2 x Domestic Homicide Reviews (DHRs) one of which was led by Oldham Community Safety Partnership (CSP)**

One of the Rapid Reviews related to knife crime. Nationally, we were briefed to expect a surge in violent offending in children and young people as lock down restrictions eased. The increase in knife crime is reflected across the 10 GM boroughs and the Designated Nurses are involved in discussions across region to develop responses.

Tragically, 2 of the Rapid Review involved the suicide of children from Bury. There has been one other attempted suicide that was non-fatal. The perceived increase in completed suicides and suicidal ideation across Greater Manchester is being reviewed and the Designated Nurses are involved in the discussions and information sharing that will help form responses to an increase in demand for child mental health support services.

Of the 10 Rapid Reviews that the safeguarding team have contributed to, two involve children resident in other Boroughs. Those children lived in neighbouring towns but received primary care services in Bury.

The Safeguarding Team have been involved in 1 Local Child Safeguarding Practice Review that relates to an incident from the previous year. This case also relates to knife crime and youth violence. The final report is expected by the end of June 2021 and recommendations and learning will be shared across the health economy and with our Designated colleagues across the network.

Of the 10 Rapid Reviews noted above, 3 will continue to full LCSPRs; two of these are the out of borough referrals from our neighbours in Salford and HMR.

The Oldham DHR victim died following suicide rather than homicide and this is a theme that is being reviewed across GM – there are currently 4 DHRs in progress across GM where suicide is the cause of death.

The action plans for all reviews belong to the BISP (Bury Integrated Safeguarding Partnership) and these are reviewed bi-monthly by the Case Review Group and the Business Groups of the BISP. The single agency action plans for health providers are

reviewed via Bury CCG Safeguarding Assurance and Governance meeting, chaired by the CCG Executive lead.

All published reviews can be accessed via: <https://burysafeguardingpartnership.bury.gov.uk/>

3.3 Greater Manchester Health and Social Care Partnership

The CCG safeguarding team supports the work of the GMH & SCP via membership of the safeguarding networks (Adults, Children, Looked after Children). All three networks support the assurance processes across the GM health economy.

Adults

3.4 React to Red

React to Red is now embedded in practice with Bury residential and domiciliary care providers. As this is a practical based assessed session it unfortunately had to be stood down during the past year due to the restrictions of the pandemic and the impact on care providers. However, this training will be revised for 2021/22 with a new package of cascade learning delivered virtually to care providers in partnership with Northern Care Alliance Tissue Viability Nurse.

3.5 Red Bag Scheme

The Red Bag Scheme is designed to support care homes, ambulance services and the local hospital in improving the transition between inpatient hospital setting and community or care homes. A red bag is used to transfer standardised paperwork, medication and personal belongings and stays with the resident throughout their hospital episode and is returned home with resident. In 2020/21 the red bags have proven invaluable in transporting essential equipment to hospital for patients with very complex needs.

A concern raised by a care home manager regarding the reporting of pressure ulcers and multiple safeguarding referrals saw a group established to develop a process to ensure all relevant medical and care history accompanied a person throughout their journey. The red bag scheme has been identified as a conduit to ensure this information is received in a timely manner as a person enters services. Providers are keen to expand the red bag scheme and this will be a focus once current pressures and restrictions in the system ease.

3.6 MAPPA (Multi Agency Public Protection Arrangements)

Is the process through which various agencies such as the Police and Probation work together to protect the public by managing the risks posed by violent and sexual offenders living in the community. Bury CCG have a duty to cooperate with these arrangements and as such attendance is mandatory and recorded and reported annually to MAPPA Strategic Management Board and Safeguarding Board for GM. There are 3 categories of MAPPA offender and 3 levels of risk management with Cat/Level 3 being the most violent/dangerous offenders where active senior oversight is required. Bury CCG have attendance at all Level 2 and 3 MAPPA meetings. Although the numbers of offenders managed in Bury is small the risk is high.

**During 2020/21 the team have achieved 100% attendance and been involved in:
MAPPA Level 2 - x 7
MAPPA Level 3 - x 1**

3.7 MARAC (Multi-Agency Risk Assessment Conference)

MARAC brings agencies together to consider high risk domestic abuse cases with the aim of preventing domestic homicide. Health is represented at the meeting by colleagues from provider services. The Deputy Designated Nurse has been involved in a scoping exercise across GM to help understand health attendance at MARAC, with a focus on Primary Care. This scoping exercise has identified areas of development for Bury that will be addressed in the coming year. The CCG safeguarding team are attendees at the strategic domestic abuse meeting and have been involved in discussions and challenges around planned changes to the current MARAC functions.

Children

3.8 Sexual Assault Referral Centre (SARC)

Following a review of cases where sexually harmful behaviour in children was noted, it was identified by the CCG safeguarding team that there was a significant waiting list for specialist therapy for child victims of sexual assault. This was escalated to NHSE and, following review, funding has been secured to support a waiting list initiative at the Sexual Assault Referral Centre (SARC). Progress will be reviewed in the coming year.

3.9 Child Mental Health

As expected, there has been an increase in demand for child mental health services in the context of the COVID pandemic. The safeguarding team have been involved in the multi-agency response to co-ordinate support to local schools. The Designated Nurse for Child Protection and the Named GP are involved in a multi-agency working party looking to empower schools to develop school wide approaches to increase emotional intelligence and resilience for all the children of Bury.

3.10 Non-Therapeutic Male Circumcision (NTMC)

The CCG safeguarding team were made aware of several cases where safeguarding concerns were identified in relation to a NTMC procedure. The CCG Safeguarding team has worked with the Local Area Designated Officer (LADO) to understand the current practise in Bury which subsequently led to conversations with other CCG safeguarding teams across GM and then to NHSE. Working with other colleagues across GM, a policy has been developed and will be adopted across the 10 boroughs that will ensure all concerns relating to NMTMC will be managed with consistency and from a multiagency position. The Designated Nurse for Child Protection is a member of both the GM and regional meetings that consider NTMC and the adoption of the policy, alongside the well-established assured provider scheme are considered best practice and will be adopted by other colleagues across the North West region.

3.11 ICON

ICON is an acronym for: Infant crying is normal Comforting methods can help. It's ok to walk away. Never, ever shake a baby. ICON is an international programme aimed at reducing the number of abusive head traumas in infants. The Deputy Designated Nurse has worked with colleagues at NHSE to launch an ICON steering group to ensure that all health providers in Bury are aware of the programme and that their staff are equipped to deliver the programme messages to parents. The program is already in use in 0-19 and midwifery services and, over the next year, training will be delivered to colleagues in Primary Care to ensure that parents regularly and consistently receive the message that ICON delivers. Compliance with the programme will be monitored via the steering group and reported to NHSE.

3.12 Fabricated and Induced Illness (FII)

FII relates to a form of child abuse where a major care giver either fabricates or induces symptoms and illness in a child to engage health care professionals. These are complicated cases that often require the compilation of detailed chronologies. The CCG safeguarding team leads and co-ordinates the response to FII concerns, in line with policy.

Looked after Children (LAC)

3.13 Dental Access

Access to dental services for children in care has been a longstanding issue. This was raised by Bury CCG to NHSE as a Greater Manchester wide issue. As a result, Bury have led on supporting the work of the NHSE commissioning team to support engagement of dental practices in ensuring they prioritise children at risk of dental decay, acknowledging that LAC fit into this criteria. A communication update was developed and sent out to all dental practises in GM reminding them of the need to prioritise LAC as they began to see patients again.

A scoping exercise has been completed to consider the development of child friendly dental practices who specialise in children in care and subject to Child Protection plans and a Local Authority led referral process has been developed for implementation across GM in Quarter One of 2021-2022.

3.14 Unaccompanied Asylum-Seeking Children (UASC)

In 2019-2020 new paperwork was developed and implemented for use during Initial Health Assessments (IHA) for UASC, recognising that not only do this cohort often have a higher than average and unique set of health needs, but that this was typically the only health assessment undertaken before reaching the age of 18. During 2020-2021 an audit was undertaken to assess the effectiveness and impact of this specialised IHA paperwork. The audit found that the paperwork effectively assessed the specific needs of this cohort, particularly in terms of Post-Traumatic Stress Disorder (PTSD) but that there was a gap in specialist service as to who could provide support for this need. This has been escalated to our children's commissioner for consideration.

The paperwork has also led to the development of a process to encourage the uptake of immunisations which is often poor in this cohort, by establishing consent for participation in the accelerated immunisation schedule during the IHA appointment, which can then be followed up by the Specialist Nurse in the community. This has led to a significant increase in the uptake of immunisations for this cohort.

Due to the success of the IHA paperwork, the specialist nurse will be developing Review Health Assessment (RHA) paperwork to mirror the assessment process for any UASC requiring a RHA.

3.15 LAC in Tier 4 Inpatient Mental Health Provisions

The CCG recognised a need to take positive steps towards creating clear communication channels in relation to LAC within Tier 4 Inpatient Mental Health Provisions. As such, work has been undertaken to develop an agreed process between Cygnet, the CCG and NCA in informing when LAC move in and out of the hospital. The CCG and NCA have also developed and delivered training to staff at Cygnet to promote the wider health needs of LAC, enable access to support for Cygnet staff and to help staff engage and support statutory health assessments.

Future plans include mirroring the positive steps taken within Cygnet around LAC in other inpatient mental health provisions within the borough.

3.16 Fostering Medicals

Covid restrictions and temporary changes to fostering regulations made access to foster carer medicals a more difficult process to navigate. Bury CCG have supported the Local Authority Fostering Team in negotiating these changes and re-establishing medicals (albeit virtually) to be completed by the Foster Carers GP. An escalation process has been developed to support both GPs and the Fostering Team in implementing this arrangement and has resulted in the continued offer of this service promoting adherence to national foster carer regulations and access to placements for Bury LAC.

3.17 Care Leavers Offer

The Care Leavers Offer has been reviewed and in March 2021 agreement was secured to offer free prescriptions to Care Leavers in Bury, in line with GM standards, with the aim to reduce barriers to accessing health and support. The process for implementation has been agreed with support from Bury Children's Social Care and training is planned to support this. It is expected to be fully implemented within Quarter 1 2021/22. In line with this, consideration is being given in how GPs can further support Care Leavers and promote this service.

A weekly drop in was provided by the Specialist Nurse pre pandemic restrictions and whilst not greatly utilised by care leavers, was promoted by health and Social Care staff alike. This has since changed to individualised support via Local Authority Personal Advisors and engagement is much more meaningful. Health Summaries continue to be provided to all children leaving care just before their 18th birthday. These provide practical support in how to access health services and additional support as required, as well as useful information on previous vaccinations, illnesses, and investigations.

Health are included in care planning and transition meetings to help identify on-going health needs and support transition to adult services as required. A notable gap was identified in how

mental health services were commissioned in Bury for 16- and 17-year olds and transition to adult mental health services. As a result, a transition service has been commissioned to provide a method of screening newly referred young people and identifying the best route for further support and supporting transition for those already in service.

Inspections and Peer Reviews

3.18 Complex Safeguarding Multi-Agency Arrangements

Following the report which was compiled highlighting the gaps in provision in the Bury area in comparison to the other GM Boroughs, progress has been made with funding secured for a WTE Band 7 specialist complex safeguarding nurse. This role will sit within the Northern Care Alliance.

3.19 Ofsted

In September 2020, Bury CCG supported the Local Authority in providing information and evidence in response to the Ofsted Inspection Key Line of Enquiry "*The focus on physical and mental health of children in care and care leavers, including how the local authority has maintained contact with children and young people and how they have facilitated contact with families*"

The feedback from Ofsted was positive in relation to the clear partnership working between Social Care and health services in response to supporting LAC's physical and emotional well-being during the pandemic

Section Four: Conclusion and Priorities

4.1 Conclusion

2020-21 was a difficult year for all, and especially for those working in health care. The CCG Safeguarding team are proud to state that, despite the significant professional and personal pressures the pandemic brought, the service continued as normal throughout the period and no services were stepped down; it was, and remains, business as usual. The team adapted to a virtual way of working and continued to advocate for the most vulnerable residents of Bury in a consistent way.

The team were also able to support the vaccination programme. Those that were not involved directly with delivering vaccines supported others in the team to do so, evidencing a strong team ethos and a will to 'get the job done'. The team ethos was also evident outside our own organisation and working alongside our colleagues from all sectors across the Borough to meet the challenges the pandemic brought us has been a humbling experience.

The ambition going forward is to build on this incredible team work to further develop our services for the most vulnerable in our Borough.

4.2 Review of Priorities for 2020-2021

1. To support the ongoing integration within the OCO, specifically in relation to the governance and assurance processes, including statutory requirements:

This has been undertaken by the CCG Safeguarding team in a number of ways, including:

- Providing regular reports to the Quality and Performance Committee for review and feedback,
- Engaging in weekly Staff Briefings and monthly OCO updates,
- Engaging with director in OCO by inviting him to team meetings
- Continuing to raise the profile of the team within the OCO, as well as raising awareness of the OCO with multi-agency partners, wider health partners and the BISP

2. To continue to support the Bury Integrated Safeguarding Partnership (BISP)

The Safeguarding team ensure attendance and active involvement at all levels of BISP, including all sub-groups, reviews and working groups. This also includes support of the BISP Training Pool.

The CCG are aware of and execute their duties as a statutory partner within the BISP – including support during reviews and professional challenge where appropriate

3. To monitor the implementation of health action plans that emerge/have emerged from Serious Case Reviews for Children, Domestic Homicide Reviews and Serious Adult Reviews

As members of case review group this is reviewed within the BISP multi-agency setting.

In addition, this is also discussed and monitored (where appropriate) during formal assurance processes for providers

4. To continue the assurance cycle of the providers where the CCG commissions services

This is an ongoing process that has continued throughout 2020/21, albeit with some adaptations due to COVID.

All relevant assurance processes have been undertaken and will continue to do so within 2021/22.

5. Liberty Protection Safeguards (LPS) system under the Mental Capacity (Amendment) Act 2019 is intended to come into force on 1 October 2020. The CCG will become a responsible body under the Mental Capacity Amendment Act (2019). The CCG as a responsible body will identify, assess and authorise a deprivation of liberty under the LPS. CCG Safeguarding Team will be working with Bury Local Authority DoLs team and Head of Adult Safeguarding to ensure that the CCG are meeting their statutory responsibilities.

Implementation of the LPS remains nationally set for April 2022, however the Code of Practice is not yet available from the Department of Health, which is causing some issues to modelling and understanding of expected process/responsibility – however the safeguarding team are members of the Bury LPS Steering Group who are trying to prepare for the change as much as is feasible in the absence of the Code of Practice.

4.2 Priorities for 2021-2022

- 1. To support the transition from CCG to the emerging GM Integrated Care System,** specifically in relation to accountability, governance structures and safeguarding statutory requirements, ensuring safeguarding strategic oversight of the health economy whilst identifying and responding to emerging risks.
- 2. To continue to support the BISP,** being an active and equal partner in the tri-partite arrangements, ensuring our statutory duties are met
- 3. In collaboration with Local Authority colleagues provide a coordinated local response to the Liberty Protection Safeguards (LPS) Codes of Practice consultation.** Using shared understanding of LPS to increase the knowledge and capabilities of CCG staff in preparation for becoming a responsible body under the new LPS arrangements - Sharing training, documentation, learning and systems where practicable to do so.
- 4. To engage, contribute and lead on COVID recovery planning,** ensuring safeguarding is the golden thread running through any service development at Place and GM level
- 5. To continue to support the statutory functions of health in relation to Looked after Children and Care Leavers, including the continued promotion of the Care Leavers Offer.** This will be supported in line with any current COVID guidance and restrictions as has been the case throughout 2020/21, responding in appropriate ways to continue to meet the health needs of LAC and Care Leavers.

Safeguarding Dashboard Quarter 1 2021-2022

Author

Clare Holder

Head of Safeguarding & Designated Nurse for Adult Safeguarding

Healthy lives strong communities

Serious Case Reviews/Serious Adult Reviews and Domestic Homicide Reviews

During Q1 2020/21 the team have contributed to 1 x Child Rapid Reviews, 0 x Child Rapid Review remain in discussion at BISP following screening. 3 x Local Child Safeguarding Practice Review, (LCSPR), are in progress with a further 1 awaiting the commissioning of an author.

One of the RRs relate to knife crime and nationally we have been briefed to expect a surge.

The Oldham DHR victim died following suicide rather than homicide and this is a theme that is being reviewed across GM – there are currently 4 DHRs in progress across GM where suicide is the cause of death.

DHR	SAR	LCSPR	Rapid review	Currently in screening
1	1	4	1	0

The action plans for all reviews belong to the BISP (Bury Integrated Safeguarding Partnership) are reviewed bi-monthly by the Case Review Group and the Business Groups of the BISP. The single agency action plans for health providers are reviewed via Bury CCG Safeguarding Assurance and Governance meeting, chaired by the CCG Executive lead. All published reviews can be accessed via:

<https://burysafeguardingpartnership.bury.gov.uk/>

Complex Safeguarding Multi-Agency Arrangements

Following the interviews on the 19th April, we have successfully recruited into the position of Complex Safeguarding Nurse. The role sits within the Northern Care Alliance and will be based at Bury Police Station with the Complex Safeguarding Team. The post holder is expected to start on the 5th July, 2021.

MAPPA (Multi Agency Public Protection Arrangements)

Is the process through which various agencies such as the Police and Probation work together to protect the public by managing the risks posed by violent and sexual offenders living in the community. Bury CCG have a duty to cooperate with these arrangements and as such attendance is mandatory and recorded and reported annually to MAPPA SMB and Safeguarding Board for GM. There are 3 categories of MAPPA offender and 3 levels of risk management with Cat/Level 3 being the most violent/dangerous offenders where active senior oversight is required. Bury CCG have attendance at all Level 2 and 3 MAPPA meetings. Although the numbers of offenders managed in Bury is small the risk is high.

During Q1 April – June 2021 the team have achieved 100% attendance and been involved in:

MAPPA Level 2 x 3

Assurance activity

NHS Bury CCG

The CCG has in place a safeguarding policy, assurance framework and a training strategy and they are available on the CCG website alongside a Safeguarding Information pack for member practices.

The training figures at the end of March 2021 of staff who had completed online Level 1 Safeguarding training were

86.1% for children's safeguarding and

85.4% for adult safeguarding

which meets the required standard of **80%** and demonstrates a quarter on quarter improvement throughout 2020/21

General Practice

A Prevent training session was delivered in May, 2021 with partners from GMP and was well attended and good feedback received.

Level 3 Adults and Children Safeguarding training session was delivered April 2021 again well attended. The session focussed on safeguarding in Primary Care during COVID and included challenges of virtual consultations, domestic violence, MCA and consent with emphasis on swabbing and vaccination and learning from recent SCR's/SARS/DHRs.

A Level 3 training session on Domestic Abuse is planned to be co-delivered with Safenet in June 2021 to Primary Care and small providers.

Assurance activity

Pennine Acute Hospital Trust

NHS Bury CCG leads the safeguarding assurance process on behalf of Oldham, Heywood, Middleton and Rochdale CCG's. The GM Safeguarding standards are within all contracts and are reviewed annually by the Designated Nurses for Safeguarding across GM, and locally, by the Quality and Performance committee. The CCG safeguarding team meet at least quarterly with PAT to review the standards and any action plan that is required.

The updated standards for 2021/22 will be reviewed in July 2021 and reported to this committee in Q2 Safeguarding Dashboard

Assurance activity

Cygnnet

Although Bury CCG do not currently directly commission a service from Cygnnet Bury, as the service is on our patch and houses vulnerable adults and young people it is good practice for us to build relationships and on behalf of GM include the provider in our annual safeguarding assurance programme.

A six weekly meeting is held between children's ward managers, the CCG and NCA Named Nurse for Safeguarding Children and LAC to review and monitor safeguarding concerns that have arisen from a children's perspective and provide advice and support as required. This includes updates and monitoring of access to local Accident and Emergency services and children in long term seclusion.

Following the introduction of the joint LA and CCG safeguarding review panel for Cygnnet Hospital, recurring themes were emerging. A meeting between the panel members and regional and local senior members from Cygnnet recognised that safeguarding processes needed to be reviewed. This has coincided with the introduction of a new safeguarding lead at the hospital. The new safeguarding lead has commenced safeguarding training, initially with social workers, which will be rolled out to all staff; A team of three senior social workers will cover duty for all staff to access and report safeguarding concerns; all safeguarding concerns raised will be appropriately investigated and the outcome returned to Local Authority via a refreshed outcome form and a new database will be formulated which will be easy for staff to navigate. This work is ongoing and meetings between Cygnnet, LA and CCG are continuing. The LA are approaching GMP to seek a local representative to also input into the process with a view to building positive relationships and more accessible referral pathways between Cygnnet and GMP.

Assurance activity

Nursing Homes

A focused CQC inspection in one of the nursing homes looking at medicines management and administration; and overall leadership of the home resulted in an inadequate rating. Whilst admissions are currently suspended due to the rating, a good response and joint working across CCG and LA has been initiated and support mechanisms discussed with the home. This support includes CCG medicines optimisation team. Focus will continue until improvements are in place.

All care homes are reporting red bags are not being returned from hospital trusts and cannot be traced. This appears to be in direct response to the COVID- 19 pandemic and concerns by the hospital teams around infection control. However, spare bags were located and five nursing homes were keen to receive and continue with the initiative until the scheme can be reviewed. All homes have been advised to continue with the passport in the meantime.

Management team at Gorseley Clough continue to work closely with local universities and actively encourage staff to access courses which will result in registrant qualification. Gorseley Clough have also recently wound down the successful COVID-19 unit. This unit supported discharges from hospital during the first and second waves of the pandemic ensuring system flow. The management are now planning a second upgrade the unit in readiness to receive admissions.

Home Manager at Rose Court attended the recent North East Sector pressure ulcer and interface with safeguarding group. The home manager is representing nursing homes across the NES ensuring positive and appropriate multiagency response.

Assurance Activity

Looked after Children

The Looked after Children's health assessments processes continues to be offered via face to face appointments. The use of virtual appointments for young people who are difficult to engage has significantly reduced but continues as part of the agreed process as this flexibility has shown a positive impact on the engagement of young people.

Bury CCG have completed the development of an agreed process for the offer of free prescriptions for care leavers and have delivered training with Local Authority Staff to support the implementation of this process.

Bury CCG continue to lead on the review and evaluation of dental access for Looked after Children and Care Leavers across Greater Manchester (GM). An agreed referral process has been implemented with Local Authorities across GM to facilitate access to dental treatment when usual routes have been unsuccessful and a scoping exercise is currently underway to support the development of LAC friendly dental practices in each area.

Assurance activity

Prevent

The new Prevent Training and Competency Framework is in final draft and will be circulated once signed off.

Within the locality there has been a low uptake for WRAP training offered by the Local Authority. The Prevent Steering Group is establishing a task and finish group to look at what the training offer entails and how to promote the training. The CCG are a member of the Steering Group. The Counter Terrorism Police Team has been working with BISP to decide how further Prevent training sessions can be delivered virtually whilst in lockdown since a lot of the content of current training packages are interactive & include the streaming of videos. Microsoft Teams is a platform to offer training which is currently being explored.

Bury CCG includes Basic Prevent Awareness Training (BPAT) in all safeguarding training packages for staff. The safeguarding team include BPAT when delivering safeguarding L3 training to Primary Care.

Prevent training figures submission for Pennine Acute Trust/NCA **Q4 89.7%**

Prevent training figures submission for PCFT **Q4 89.5 %**

The Prevent Peer review will be conducted remotely by GMCA. The Bury Channel Peer review is planned for October 2021.