

**NHS DORSET CLINICAL COMMISSIONING GROUP**  
**GOVERNING BODY MEETING**  
**SIX MONTHLY UPDATE REPORT ON SAFEGUARDING**

<b>Date of the meeting</b>	15/11/2017
<b>Author</b>	V Cooper - Designated Adult Safeguarding Manager W Thorogood - Designated Nurse Consultant for children
<b>Sponsoring Board Member</b>	Dr B Sharland, Locality Chair for Central Bournemouth
<b>Purpose of Report</b>	This report highlights the safeguarding activity for quarter one and two across Dorset, Bournemouth and Poole for the financial year 2017/18.
<b>Recommendation</b>	The Governing Body is asked to <b>note</b> the report.
<b>Stakeholder Engagement</b>	<ul style="list-style-type: none"> <li>• The executive lead for safeguarding (Director of Quality and Nursing) is a statutory member of both the Adult and Children Safeguarding boards;</li> <li>• The Designated Safeguarding leads are members of a number of the Adult and Children Safeguarding Boards' subgroups;</li> <li>• The safeguarding leads meet regularly with all the NHS provider safeguarding leads, the three Local Authority Safeguarding teams and the Police;</li> <li>• The named safeguarding GPs engage with General Practice and Primary Care to provide awareness, advice and support around safeguarding activity;</li> <li>• Elements of public engagement have been undertaken through the Adult and Children Safeguarding Boards and through discussion with the wider communications team in the CCG.</li> </ul>
<b>Previous GB / Committee/s, Dates</b>	Annual report for the Governing Body meeting 17/05/17

**Monitoring and Assurance Summary**

<b>This report links to the following Strategic Principles</b>	<ul style="list-style-type: none"> <li>• Services designed around people</li> <li>• Preventing ill health and reducing inequalities</li> <li>• Sustainable healthcare services</li> <li>• Care closer to home</li> </ul>		
	<b>Yes</b> [e.g. ✓] <i>Copy &amp; paste tick</i>	<b>Any action required?</b>	
		<b>Yes</b> Detail in report	<b>No</b>
All three Domains of Quality (Safety, Quality, Patient Experience)	✓		✓
Board Assurance Framework Risk Register	✓		✓

# 9.8

Budgetary Impact	✓		✓
Legal/Regulatory	✓		✓
People/Staff	✓		✓
Financial/Value for Money/Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓
<b>I confirm that I have considered the implications of this report on each of the matters above, as indicated</b>	✓		

Initials : VC/ WT

## **1. Introduction**

- 1.1 Adult and Children Safeguarding is the process of protecting individuals who are unable to protect themselves from abuse or neglect.
- 1.2 The responsibility of NHS Dorset CCG is to seek assurance that safeguarding is integral to service development, clinical governance and risk management arrangements, whilst working with partner agencies.
- 1.3 This report provides an overview of activity during the first six months of 2017/18 and is intended to assure the Governing Body on progress and developments related to the safeguarding agenda.

## **2. CCG Safeguarding Assurance**

- 2.1 Dorset CCG remains compliant with its statutory requirement for safeguarding across the organisation, the Governing Body receives annual safeguarding training.
- 2.2 The CCG's safeguarding policy has been reviewed and approved. An initial draft of the requirements of the CCG with regards to Domestic Homicide has been written and once approved will be embedded within the wider patient safety and risk process.
- 2.3 Throughout the last six months, the safeguarding team have been working in collaboration with the patient safety and risk team to ensure information around safeguarding is appropriately stored.
- 2.4 The safeguarding team continue to offer specialist health advice and support to the LAs for any escalated Section 42 Adult Safeguarding Enquiries or escalated Children's Safeguarding that has implications for any NHS provider. This is to seek assurance that any wider risks are identified and managed, and plans are put in place to minimise larger organisational risk and identify poor practice.
- 2.5 The safeguarding leads meet regularly with all the NHS providers to continue to seek assurance that robust safeguarding processes are in place and to offer supervision and development.
- 2.6 Due to retirement within the CCG safeguarding team, a new Named safeguarding GP, Dr Raquel Bechka has been appointed to join Dr Isi Sosa and Dr Sam Abdollahian.

## **3. Adult Safeguarding Enquires**

- 3.1 The Care Act places a duty on Local Authorities to make enquiries, or request other agencies, such as NHS Trusts to do so, in order to establish whether action is needed to prevent abuse, harm, neglect or self-neglect to an adult at risk of harm.

- 3.2 The number of Section 42 safeguarding Enquires made known to the CCG in the first two quarters of 2017 was twenty-one.
- 3.3 During the first two quarters of 2017/18 there have been two safeguarding Section 42 enquiries relating to GP Practices. The main themes of these have been pertaining to prescribing and care provision; the prescribing issues have all been reviewed by Medicines Management. Both concerns have been closed as unsubstantiated following a significant event review, where the report has been shared with the LA.

## **4. Adult Safeguarding in Provider Services**

- 4.1 The main themes of adult safeguarding concerns that progress to a Section 42 Enquiry have been regarding the discharge processes.
- 4.2 The themes from the safeguarding enquiries are discussed at the CCG Quality Surveillance Improvement Group (QSIG) to triangulate intelligence around the providers, allowing for any contractual issues to be raised and discussed.

## **5. Numbers of Children Subject to a Child Protection Plan**

- 5.1 There appears to have been a considerable drop in the numbers of children subject to a protection plan across the Dorset LA this quarter. This however is in line with the national drive to reduce the overall number of children placed on a protection plan. This continues to be closely monitored through the two Local Safeguarding Children's Boards (LSCB). A caveat is in place for children who are referred but do not progress to a protection plan, but are referred within two months to explore the quality of the decision-making by the Multi Agency Safeguarding Hub (MASH). All LAs are looking to improve access to "Early Help".
- 5.2 During quarter one the number of cases the Designated Nurse has had oversight of has increased through the formal escalation process. The rationale behind this may be due to the decreased number of children in receipt of statutory services and thresholds, or concerns overseen that have resulted in full protection plan being put in place.

## **6. Children's Safeguarding in Provider Services**

- 6.1 A review of the current arrangements for Children Safeguarding supervision has been undertaken and it has been agreed that all key providers will undertake peer supervision monthly with a designated nurse consultant attending every 6 months. This method will help standardise practice across the health landscape. Adult safeguarding peer supervision continues to be offered on a monthly basis at present due to complexities of the MCA and Human Rights.

- 6.2 During quarter two the Section 11 (Children's Act) audit has been completed by all providers. A number of improvements have been identified across the whole health landscape along with action plans that evidence improvements in practice delivery.

## **7. Safeguarding Training**

- 7.1 Dedicated GP peer supervision sessions continue bi-monthly as well as bespoke Safeguarding awareness, Domestic Abuse sessions and Looked After Children. All these sessions have been positively evaluated.
- 7.2 The Named GPs and Designated Nurses for both Adults and Children encourage front line GPs to access the CCG team for supervision. Plans have begun to be put in place to work with all GP Practices to quality assure their safeguarding practice and to review their Section 11 compliance.
- 7.3 A number of training events have been arranged for quarter 3 which will include three facilitated sessions for GPs around Domestic Abuse, together with an adult and child safeguarding training event for local Dentists, a Mental Capacity Act awareness session for local Pharmacists, and Adult Safeguarding awareness day for Practice Nurses.
- 7.4 An adult safeguarding leadership day has been arranged through the CCG during quarter three, for all local NHS providers to develop leadership and supervision skills across the safeguarding landscape.
- 7.5 The CCG will be supporting the National "Truth" project locally. The Truth project is the national enquiry aimed at exploring historic sexual abuse.

## **8. Commissioned Services**

### **Multi-Agency Safeguarding Hub (MASH)**

- 8.1 The health element of the MASH is commissioned by the CCG to provide health input into child protection enquires. This is provided by Dorset HealthCare Foundation Trust

### **Child Sexual Exploitation (CSE)/ Missing Children Service**

- 8.2 Currently Barnardos are jointly commissioned through the CCG, the three LAs and the Police to provide a service to meet the needs of children subject to Sexual Exploitation (CSE) and Missing Children across Dorset. This service is being reviewed due to an LA request to change its provision. The impact of this is yet to be realised and there is a potential risk in the ability to deliver to time scales both the return home interviews and the therapeutic follow up. The CSE caseload across Dorset remains relatively static with between 15 -18 cases in total.

### **Sexual Assault Referral Centre (SARC)**

- 8.3 The Dorset SARC is jointly commissioned by NHS England and the Office of the Police and Crime Commissioner, and is provided by G4S. The Health and Police Partnership Board oversees the performance and governance of the SARC. The CCG is represented on the Partnership Board.

## **9. Developments**

### **Safeguarding Children and Young People in Health Group (SCYPiH)**

- 9.1 SCYPiH continues to share best practice whilst building a cohesive view of children's safeguarding across Dorset and acts a strong link to learning and development from all providers.

### **Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS)**

- 9.2 Work continues with the Mental Capacity Act (MCA) team to seek assurance that the principles of the Act are applied into practice. All providers have action plans in place to assure themselves this is being addressed.
- 9.3 Plans are being put in place in collaboration with NHSE to deliver training to local dentist, pharmacists and optometrist in the autumn of this year.
- 9.4 There continues to be high level of referrals for DoLs to be authorised, however compared to the previous year, there has been a slight decrease, but there is a significant rise in the number of priority referrals.
- 9.5 The number of applications to the Court of Protection (CoP) continues to increase, with a high number of these being DoLs cases.

## **10. Domestic Abuse (DA)**

- 10.1 During the last six months, considerable work has been undertaken to ensure there is a DA lead in each GP Practice. Bespoke facilitated training sessions are planned to be delivered to all leads.
- 10.2 DA has a strong theme in Domestic Homicide Reviews (DHR) with effects on both children and adults, a separate update report has been produced to indicate the current activity of DHR locally.
- 10.3 There will be a number of work streams that will be developed to meet the Domestic Abuse strategy. One stream is the Multi Agency Risk Management conference (MARAC) review, which is to look at the quality, performance and attendance alongside multi-agency working. The CCG have been requested to look at an options paper for health representation at said conferences.
- 10.4 Dorset Police have developed a process that identifies people who are repeatedly referred to MARAC with complex needs to support the identification of their ongoing risk and management.

- 10.5 Domestic abuse remains the highest impact on child safeguarding, which negatively impacts on the child's development. The LSCB are monitoring the adolescent violence group, as there continues to be an increase in the rise of adolescent upon adolescent violence, and adolescent to parent violence.

## 11. Self-Neglect and Hoarding

- 11.1 Additional training around the management of this complex subject has been delivered during this year in collaboration with Dorset County Council. This has included the use of the Multi Agency Risk Management (MARM) process.

## 12. PREVENT

- 12.1 PREVENT remains a high priority for the Country following a number of terrorist attacks this year. Providers will be expected to submit PREVENT data from the autumn.
- 12.2 Until Quarter Two it has not been a mandatory requirement for the NHS providers to report their training figures. This will be reviewed with respect to the revised NHSE training framework.

Data extracted from the National PREVENT data set				
Quarter Two	Dorset County NHS Foundation Trust	Dorset Healthcare University NHS Foundation Trust	Poole Hospital NHS Foundation Trust	Royal Bournemouth NHS foundation trust
Percentage of staff who have received Basic Prevent Awareness training over last 3 years	100%	83.8%	95%	94.2%
Percentage of staff currently in the organisation that are currently in date with WRAP	88.3%	22.4% * this may be due to the turnover of staff and the number of staff needing the training. With the introduction of the online training, and an increase in the number of facilitators this projected to improve	88.3%	89.9%
Cumulative number of Prevent referrals to SRU including most recent quarter	0	12	0	0
Cumulative number of Channel panels including most recent quarter	0	Not known	0	0

## 13. Modern Day Slavery and Human Trafficking

- 13.1 The safeguarding team completed an annual statement outlining the CCG commitment to the Modern Slavery agenda. The CCG has the necessary checks in place to ensure we are not breaching any regulations.

13.2 There have been no reported cases of children being trafficked across Dorset.

## **14. Female Genital Mutilation (FGM)**

14.1 There have been no reported cases of children being subjected to FGM this quarter. There has been a small number of adults who have received support and intervention this quarter.

14.2 Dorset GPs have a statutory requirement to register FGM, currently we have a number of GPs who have not yet registered. Work is ongoing to encourage registration.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/525405/FGM\\_mandatory\\_reporting\\_map\\_A.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/525405/FGM_mandatory_reporting_map_A.pdf)

## **15. Named Safeguarding Lead GPs**

15.1 During quarter one and two the named GPs have continued to work on the development of the safeguarding templates to be used in SystmOne GP electronic records.

15.2 Work has been undertaken to improve GP attendances/input at Child Protection conferences as this continues to present as a challenge. The GPs are looking to pilot a new form that should be completed between social care and the GP via a booked appointment time.

15.3 The Named GPs continue to produce a monthly safeguarding bulletin that is disseminated to all Practices. This contains all national and local safeguarding news, events and relevant hot topics.

## **16. Adult Safeguarding Boards (ASB)**

16.1 The Training and Workforce subgroup has had a focus on the effective learning transfer from Safeguarding Adult Reviews as well as joining up training requirements from the community safety partnerships around DA.

16.2 The Policy and Procedures subgroup has reviewed the multi-agency procedures and now updates them on a six monthly cycle. The group will also be considering how the wider preventative safeguarding agenda is embraced and enhanced.

16.3 During quarter one, there was a whole service enquiry undertaken, which indicated that a review of the procedures was required. This piece of work has commenced.

16.4 Frontline practitioners are reporting misunderstanding around the different types of multi-agency meetings and this has been escalated to the chair of the policy and procedures group for urgent attention.

## **17. Local Safeguarding Children Boards (LSCB)**

- 17.1 The CCG is represented at both LSCBs and various sub-groups. Both the NHS and Police continue to champion the proposal for a Pan-Dorset LSCB Board. The Independent Chair is driving change in line with the Wood review. This could see a major change to current practice.
- 17.2 The LSCB is currently undertaking its statutory Section 11 audit, Dorset CCG has two areas for improvement regarding Disclosure and Barring checking, and the patient information for children around complaints.
- 17.3 Neglect remains a Pan-Dorset LSCB priority, child safeguarding is working to improve early identification.
- 17.4 Dorset Local Safeguarding Board (LSCB) was reported to be Inadequate by Ofsted last year. Actions have since been taken to make the required improvements.

## **18. Safeguarding Adult Reviews (SAR)/ Serious Case Reviews (SCR) Case Audits/Whole Service Reviews**

- 18.1 There is a separate report being presented to the Governing Body around Domestic Homicide Reviews (DHRs), SARs and SCRs.

## **19. Serious Investigations/STEIS/Managing Allegations**

- 19.1 A recent case highlighted issues relating to agency staff recruitment in primary care. Work has taken place to mitigate future risks, which is being shared with NHSE. This particular case was referred to the NMC.
- 19.2 Three allegations that implicate local GPs within safeguarding children have been managed under the Local Authority Designated Offices (LADO) process.

## **20. External Inspections and Reports**

- 20.1 To address GP surgeries that had received an inadequate rating from CQC, the safeguarding team have devised a quality assurance template, which is offered to all surgeries with bespoke training.

## **21. OFSTED Inspections**

- 21.1 During quarter one DCC Children's Services were subject to an improvement plan following a "Requires Improvement" rating by Ofsted, this work continues.
- 21.2 An inspection of Services for DCC children with Special Educational Needs and Disabilities (SEND) was carried out jointly with CQC in early 2017. This has resulted in a requirement for the Local Authority and the CCG to produce a statement of action in response to the findings and recommendations. A director level oversight group has been set up to oversee the actions required.

## 22. NHS England Wessex Safeguarding

22.1 NHS England has established their key safeguarding objectives for 2017/18. These are:

- Looked After Children;
- Child Sexual Exploitation;
- Female Genital Mutilation;
- PREVENT;
- Mental Capacity Act;
- Additional objectives around learning from SAR's, SCR's and DHR's and Domestic Abuse have been included.

22.2 These will be led through the National Safeguarding Network and Area teams.

## 23. Objectives for the next six months

23.1 The safeguarding team will continue to understand the wider implications of:

- Modern Day Slavery and Human Trafficking;
- Adult and Child Sexual Exploitation;
- Sexual Violence;
- PREVENT.

across Dorset, Bournemouth and Poole. Some of this work is led by the Community Safety Partnership so robust working relationships will continue to be built.

23.2 The safeguarding team will continue to raise the profile and awareness of Domestic Abuse (DA) to gain greater understanding around the responsibilities health has within this to ensure frontline practitioners are confident to manage these complex cases.

23.3 Links will continue to be strengthened with Continuing Health Care (CHC) teams to ensure staff are confident in the process and risk management of individuals with complex health and social care needs that may require safeguarding.

23.4 Focus will be given to CPIS (Child Protection Information Sharing) a national system to share information between Emergency Departments (ED) and Children's Social Services.

## 24. Conclusion

- 24.1 The CCG continues to maintain its statutory obligations and focus on safeguarding across Dorset's healthcare system.
- 24.2 The main areas for consideration are improvements required by external regulators and learning from Serious Case/Adult reviews.

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