

Meeting: Governing Body			
Meeting Date	26 May 2021	Action	Receive
Item No.	9e	Confidential	No
Title	Safeguarding Dashboard - Quarter 4 2020-2021		
Presented By	Clare Holder, Head of Safeguarding & Designated Nurse for Adult Safeguarding		
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Clinical Lead			

Executive Summary
The attached report outlines highlights of the assurance work completed by the CCG Safeguarding Team during Q4 of 2020-21. The report includes assurance activity with providers and key partner agencies, and the input/outcomes into the statutory Local Child Safeguarding Practice Reviews, Serious Adult Reviews and Domestic Homicide Reviews.
Recommendations
It is recommended that Governing Body consider and accept the report for Quarter 4 as outlined.

Links to CCG Strategic Objectives	
SO1 - To support the Borough through a robust emergency response to the Covid-19 pandemic.	<input checked="" type="checkbox"/>
SO2 - To deliver our role in the Bury 2030 local industrial strategy priorities and recovery.	<input checked="" 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 checked="" 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 type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Implications						
Has any engagement (clinical, stakeholder or public/patient) been undertaken in relation to this report?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Have any departments/organisations who will be affected been consulted ?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
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"/>
Are there any financial Implications?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Is an Equality, Privacy or Quality Impact Assessment required?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, has an Equality, Privacy or Quality Impact Assessment been completed?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
If yes, please give details below:						
If no, please detail below the reason for not completing an Equality, Privacy or Quality Impact Assessment:						
Are there any associated risks including Conflicts of Interest?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
Are the risks on the CCG's risk register?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

Governance and Reporting		
Meeting	Date	Outcome
N/A		

Safeguarding Dashboard

Quarter 4 2020-2021

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 Q4 2020/21 the team have contributed to **4 x Child Rapid Reviews**, **2 x Child Rapid Review** remain in discussion at BISP following screening. **1 x Local Child Safeguarding Practice Review, (LCSPR)**, is in progress with a further 2 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 x Bury 1 x Oldham	1	1 2 x awaiting Author to commence	2 x Bury 1 x HMR 1 x Salford	2

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 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 and the funding has been transferred. Recruitment is in process with interviews planned for 19th April, 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 Q3 January – March 2021 the team have achieved 100% attendance and been involved in:

MAPPA Level 1 – x 1

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 December 2020 with partners from GMP and was well attended and good feedback received. Level 3 Adults and Children Safeguarding training session was delivered in January 2021 and 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.

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 66 standards and any action plan that is required. At the end of Q4 PAT have 10 standards on Amber and 2 on Red which is an improvement on Q3 of a further 4 standards moving to Green.

Progress on the action plan will be reported to Quality and Performance committee each quarter. The outcomes are reported annually to NHSE/I GMH&SCP

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.

Cygnnet Hospital Bury submit all safeguarding referrals to the local authority operational safeguarding team. However, due to the high number and appropriateness of referrals, a multiagency panel has been created to review and quality assure the standard of referrals. The panel includes local authority strategic Safeguarding Manager, 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 for last 3 months 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 have 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

Assurance activity

Nursing Homes

GM standards for safeguarding assurance now complete for 2020/21 for all 10 nursing homes. A follow up review is required for one home, however, currently awaiting Home Manager to return from sick leave. Example of cross service work and support; a Home Manager from one nursing home contacted the CCG to find out where a syringe driver could be sourced for a person who was on end of life care. Following facilitation, support and training was provided by Bury Hospice within the day ensuring the person remained at the centre of their care.

A group has been established across the north-east sector to establish pathways around pressure ulcer reporting and the interface with safeguarding. This requires multi service involvement and the Home Manager from Rose Court has agreed to be involved and provide support to ensure processes are aligned throughout the NES.

Gorseley Clough and Oak Lodge have achieved 100% compliance of staff uptake of COVID-19 vaccine. Regency are now under new ownership from Four Seasons to Lovett Care.

Bank House are under new ownership and have recently recruited a new experienced home manager. 3 x nursing homes through discussion have openly shared safeguarding concerns they have raised.

Also, open discussions have taken place regarding the recruitment of a member of staff who has been the centre of previous safeguarding alerts. Although this should be expected, the open and honest conversations show the positive relationship the homes have with the CCG and LA Provider Relationship Team.

Partnership working between CCG LA CQC and the nursing homes continues with sharing of safeguarding concerns and soft intelligence.

Assurance Activity

Looked after Children

The Looked after Children's processes continue to be offered via face to face appointments, with some virtual appointments being offered for young people who are difficult to engage. This flexibility has shown a positive impact on the engagements of young people within their health assessments and compliance against the agreed Key Performance Indicators remains good.

An escalation process has been implemented to support Foster Carer medicals being completed by GPs in and out of the Bury area. This has helped to unblock some of the issues in the process and ensure continued support of the foster carer approval process.

Bury CCG have recently secured agreement for the provision of free prescriptions for care leavers and are currently developing an agreed process for implementation with the support of our local provider service and Local Authority. A training offer will also be developed to support this.

The Provider Forum has become fully established and is well attended by homes in the area. This has helped support professional links with the homes and has improved training attendance at local training by children's home staff. Positively, all children's homes and semi-independent provisions in Bury have been offered Covid vaccinations for all staff and a high proportion have taken up the offer.

Assurance activity

Prevent

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 **Q3 76.2 %** although below trajectory, shows considerable improvement from 2019/20 and is an increase from Q2. Prevent training figures submission for PCFT **Q3 87.7 %**. The Prevent Peer review will be conducted remotely by GMCA. The Bury Channel Peer review is planned for October 2021.