

Item: 8.2

Report to:	NHS Hull Clinical Commissioning Group Board
Date of Meeting:	26 January 2018
Title of Report:	Safeguarding Adults Quarterly Update (Q2) 2017-18
Presented by:	Dave Blain – Designated Professional for Safeguarding Adults
Author:	Dave Blain – Designated Professional for Safeguarding Adults

STATUS OF THE REPORT:			
To approve	<input type="checkbox"/>	To endorse	<input type="checkbox"/>
To ratify	<input type="checkbox"/>	To discuss	<input type="checkbox"/>
To consider	<input type="checkbox"/>	For information	<input type="checkbox"/>
To note	<input checked="" type="checkbox"/>		

PURPOSE OF REPORT:	
<ul style="list-style-type: none"> To provide a quarterly update to the NHS Hull CCG Board in regard to safeguarding adults arrangements across the Hull area. To demonstrate how NHS Hull CCG, and commissioned providers, are fulfilling legislative duties in relation to safeguarding adults in accordance with the Health and Social Care Act 2012 and the Care Act 2014 	
LEVEL OF CONFIDENCE:	
NHS Hull Clinical Commissioning Group (CCG)	
PROCESS	Rating
There is a HIGH level of confidence in NHS Hull CCG discharging its duties in relation to safeguarding adults due to structure, policies and processes currently in place.	High
PERFORMANCE	
There is a MEDIUM level of confidence in NHS Hull CCG discharging its duties in relation to safeguarding adults due to not achieving 95% target for safeguarding adults training and a lack of progress with CT Prevent training compliance in Q1 and Q2.	Medium
Hull & East Yorkshire Hospitals (HEY)	
PROCESS	Rating
There is a HIGH level of confidence in HEY discharging its duties in relation to safeguarding adults.	High

PERFORMANCE	
There is a MEDIUM level of confidence in HEY discharging it's duties in relation to safeguarding adults due to lack of progress in Q1 and Q2 to achieve 80% training compliance for CT Prevent .	Medium

Humber Foundation Trust (HFT)

PROCESS	Rating
There is a HIGH level of confidence in HFT discharging it's duties in relation to safeguarding adults.	High
PERFORMANCE	
There is a MEDIUM level of confidence in HFT discharging it's duties in relation to safeguarding adults due to issues highlighted within Safeguarding Adult Reviews (SAR) and slow progress with training compliance.	Medium

City Health Care Partnership (CHCP)

PROCESS	Rating
There is a HIGH level of confidence in CHCP discharging it's duties in relation to safeguarding adults.	High
PERFORMANCE	
There is a HIGH level of confidence in CHCP discharging it's duties in relation to safeguarding adults.	High

SPIRE

PROCESS	Rating
There is a LOW level of confidence in SPIRE discharging it's duties in relation to safeguarding adults due to lack of attendance and engagement with local safeguarding boards and CT prevent meetings.	Low
PERFORMANCE	
There is a LOW level of confidence in SPIRE discharging it's duties in relation to safeguarding adults due to low levels of compliance and lack of progression with CT prevent training.	Low

YORKSHIRE AMBULANCE SERVICE (YAS)

PROCESS	Rating
There is a HIGH level of confidence in YAS discharging it's duties in relation to safeguarding adults.	High
PERFORMANCE	
There is a HIGH level of confidence in YAS discharging it's duties in relation to safeguarding adults.	High

RECOMMENDATIONS:

The members of the NHS Hull CCG Board are requested to note this report in relation to safeguarding adult's activity and the responsibilities and actions of the NHS Hull CCG and providers.

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No

Yes

CCG STRATEGIC OBJECTIVE:

To set the quality and safety standards aligned to the objectives of the integrated commissioning strategy and work plan.

The safeguarding of adults with care and support needs is a legislative duty of NHS Hull CCG and is embedded within all quality and safety processes of the organisation.

IMPLICATIONS: *(summary of key implications, including risks, associated with the paper),*

Finance	There are no identified financial risks associated with this report.
HR	There are no identified HR implications.
Quality	Quality issues not addressed may result in unacceptable levels of care and poor performance from contracted providers.
Safety	Risks not addressed may result in safety concerns for adults at risk of or suffering from abuse and neglect.

ENGAGEMENT:

- Challenge and scrutiny of provider safeguarding compliance and performance takes place via the Clinical Quality Forums (CQF), Quality Delivery Groups (QDG) and Contract Management Boards (CMB).
- Inter-agency working primarily takes place with health and other partner agencies via the Hull Safeguarding Adults Partnership Board (HSAPB) and associated sub-groups, Community Safety Partnership (CSP), Counter Terrorism (CT) Prevent groups and other multi agency processes referenced within the report.
- Engagement with General Practitioners (GP) takes place via the NHS CCG Board and through the Protected Time for Learning (PTL) training programme.
- The CCG Named GP for Safeguarding Adults also provides further engagement, training and support for primary care staff.

LEGAL ISSUES:

All safeguarding activity described in this report is underpinned and supported by current national legislation and statutory guidance.

EQUALITY AND DIVERSITY ISSUES:

	<i>Tick relevant box</i>
An Equality Impact Analysis/Assessment is not required for this report.	X
An Equality Impact Analysis/Assessment has been completed and approved by the lead Director for Equality and Diversity. As a result of performing the analysis/assessment there are no actions arising from the analysis/assessment.	
An Equality Impact Analysis/Assessment has been completed and there are actions arising from the analysis/assessment and these are included in section xx in the enclosed report.	

THE NHS CONSTITUTION:

Safeguarding adults is integral to the NHS Constitution and is framed by the values and principles which guide the NHS, with particular reference to the provision of high quality care that is safe, effective and focussed on patient experience.

Principle 1 – The NHS provides a comprehensive service, available to all.

Principle 2 – Access to NHS services is based on clinical need, not an individual's ability to pay.

Principle 3 – The NHS aspires to the highest standards of excellence and professionalism.

Principle 4 – NHS services must reflect the needs and preferences of patients, their families and carers.

Principle 5 – The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population.

Principle 6 – The NHS is committed to providing best value for taxpayers money and the most effective, fair and sustainable use of finite resources.

Principle 7 – The NHS is accountable to the public, communities and patients that it serves.

Q2 2017/18 SAFEGUARDING ADULTS UPDATE

1. INTRODUCTION

The purpose of this report is to:

- a) Provide a quarterly update in regard to safeguarding adult's arrangements across the city of Hull and surrounding area during 2017/18.
- b) Demonstrate how NHS Hull CCG is fulfilling its statutory responsibilities in relation to adults with care and support needs who are suffering from or are at risk of abuse and neglect in accordance with the Health and Social Care Act 2012 and the Care Act 2014.
- c) Provide an update on any safeguarding adult's multi-agency reviews.

2. NHS Hull CCG ASSURANCE PROCESSES

NHS HULL CCG SAFEGUARDING ADULTS STAFF TRAINING COMPLIANCE

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18
SG Adults	53%	52%	75%		
CT Prevent WRAP	84%	82%	84%		

Safeguarding adults training compliance for CCG employees demonstrated a low compliance at the start of Q1 against the CCG target of 95% following transfer of provision and migration of the monitoring process to the Electronic Staff Records (ESR) system. Three further face to face safeguarding adult sessions were delivered in Q2 for CCG staff to address this and improvement is demonstrated above. This also included a safeguarding adult's session as part of the CCG board development day in Q2. Compliance improved and had achieved 83% by the end of November 2017.

A further CT prevent WRAP workshop was delivered in December 2017 to provide all CCG staff an opportunity to gain further compliance. This was attended by 4 staff with a further 2 staff providing compliance evidence from before joining the CCG. This resulted in compliance raising to 90% by the end of November 2017.

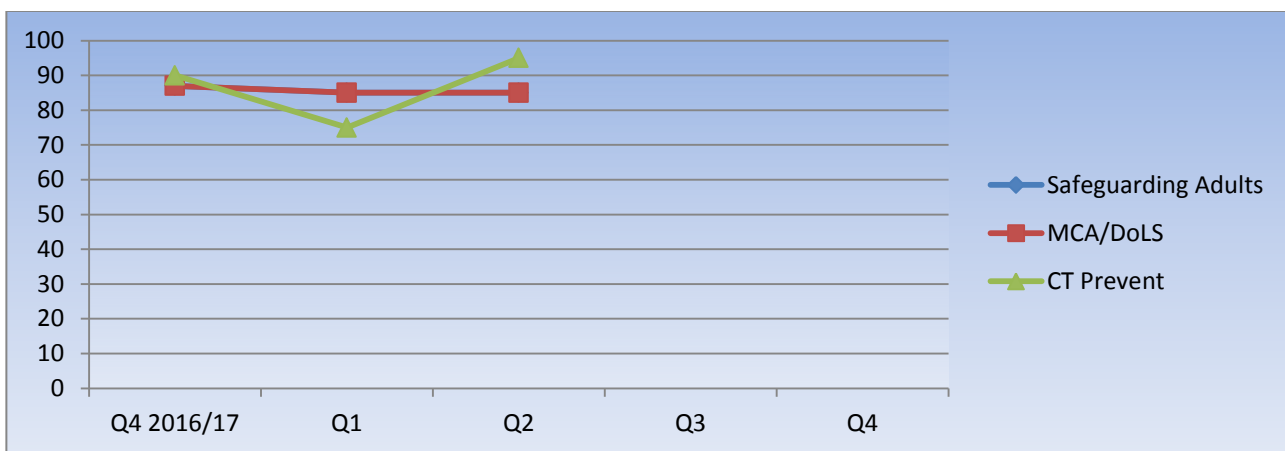
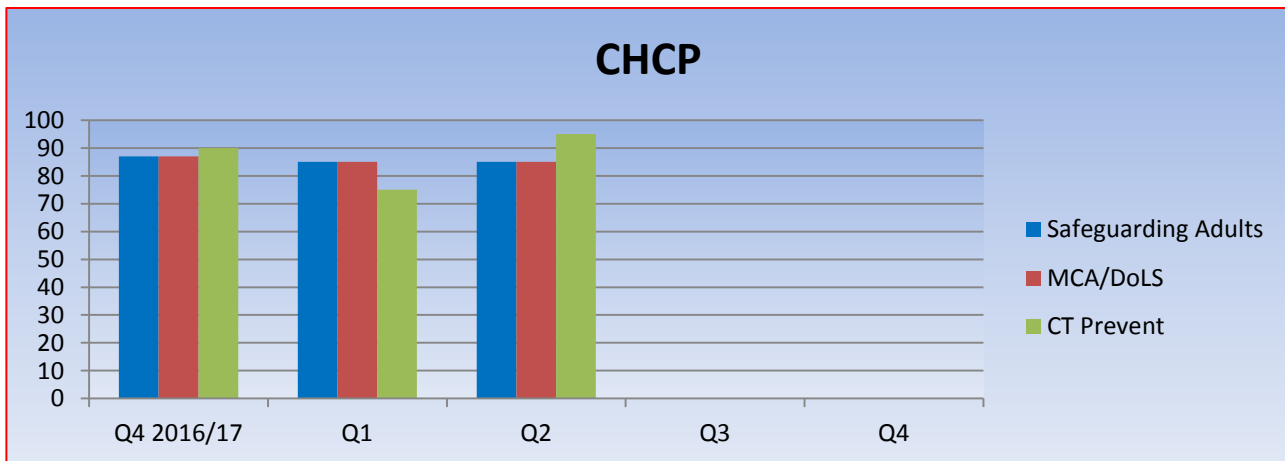
Provider self- declarations - As per the NHS England Accountability and Assurance Framework "Safeguarding forms part of the NHS standard contract (service condition 32) and commissioners will need to agree with their providers, through local negotiation, what contract monitoring processes are used to demonstrate compliance with safeguarding duties". As previously reported to the Quality and Performance Committee the existing provider self-declaration was revised, updated and agreed with providers. It includes both qualitative and quantitative information. This is embedded as part of the standard contract for providers and monitoring of performance and compliance occurs via the Clinical Quality Forums (CQF), Quality Delivery Groups (QDG) and/ or Contract Management Boards (CMB).

3. CITY HEALTH CARE PARTNERSHIP (CHCP)

3.1 Governance and Accountability

Training Compliance

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18
SG Adults	87%	85%	85%		
MCA/DoLS	87%	85%	85%		
CT Prevent	90%	75%	95%		



CHCP continued to provide safeguarding adults practitioners 2 days per week for health support within the Multi Agency Safeguarding Hub (MASH) via a contract variation. CHCP demonstrated a drop for Counter Terrorism (CT) prevent training compliance in Q1 as previously reported due to new levels of staffing within the organisation. The prevent WRAP workshop is delivered as part of the corporate induction programme, so all new staff will complete CT prevent training as part of the process. Progress of compliance will be monitored via CMB processes and recovery has been demonstrated in Q2. CHCP safeguarding leads continue to attend the local CT prevent meetings and various HSAPB groups. CHCP continued to report levels of safeguarding adult and MCA training compliance within contractual standards.

CHCP have agreed to the changes in the commissioned safeguarding service specification and will begin to deliver safeguarding adults training for primary care at

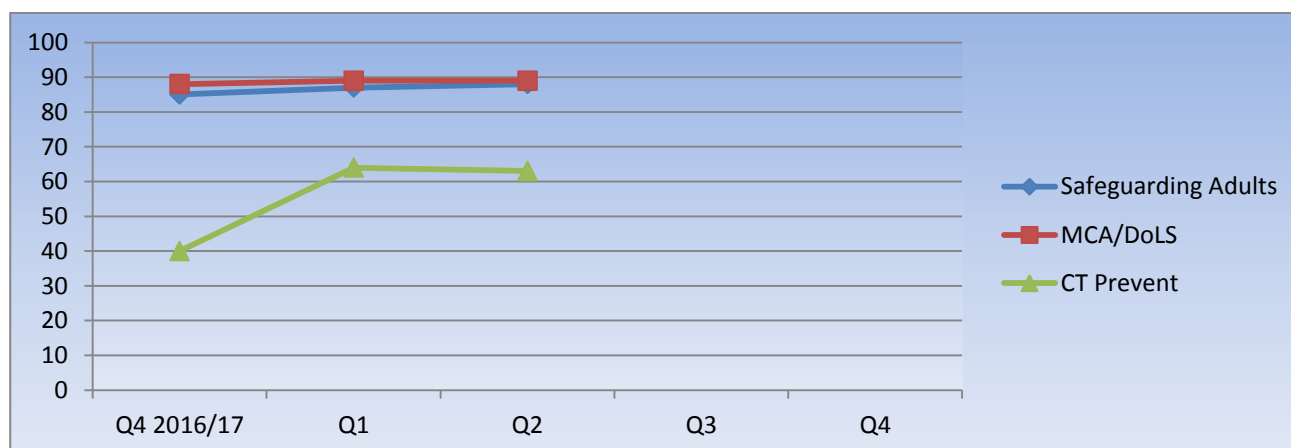
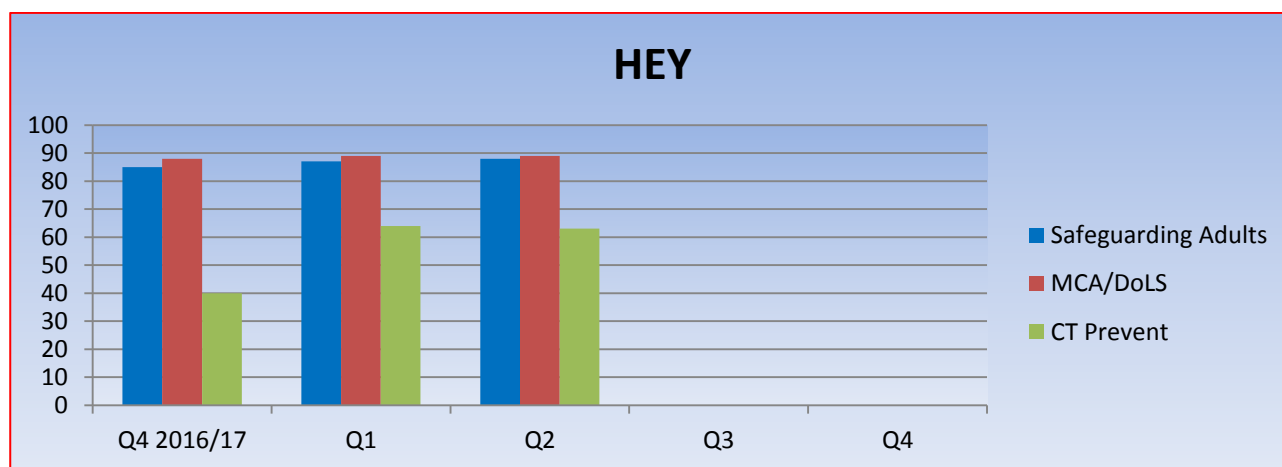
a level consistent with current provision for safeguarding children in Q4. CHCP are fully engaged with all current HSAPB SAR's and DHR's in the city.

4. HULL AND EAST YORKSHIRE HOSPITALS TRUST (HEY)

4.1 Governance and Accountability

Training Compliance

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18
SG Adults	85%	87%	88%		
MCA/DoLS	88%	89%	89%		
CT Prevent	40%	64%	63%		



The HEY Assistant Chief Nurse (ACN) is the trust lead for safeguarding adults and is supported by 2 safeguarding adults specialist nurses (1xWTE and 1x 0.4). The trust is engaged with the HSAPB and are represented at all levels on various groups.

HEY continued to be involved in current SARs and DHR's in the city, resulting in recommendations for improving safeguarding adults within the trust. Members of the HSAPB have already visited the trust early in Q3 for assurance that recommendations are being implemented.

HEY has demonstrated a slight drop in CT prevent compliance during Q2. This has been addressed via conversations at the recent QDG and rationale provided

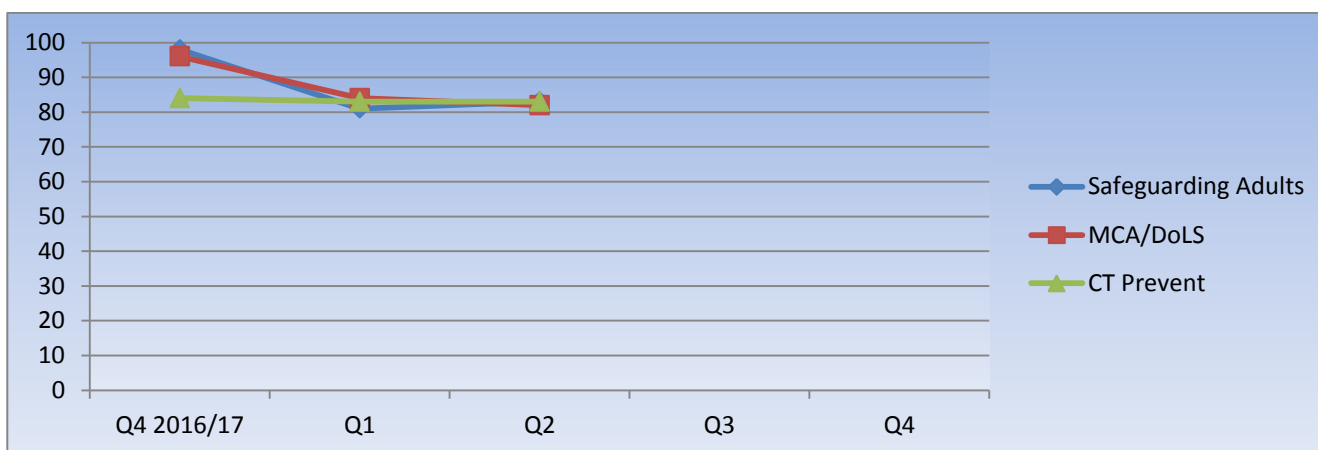
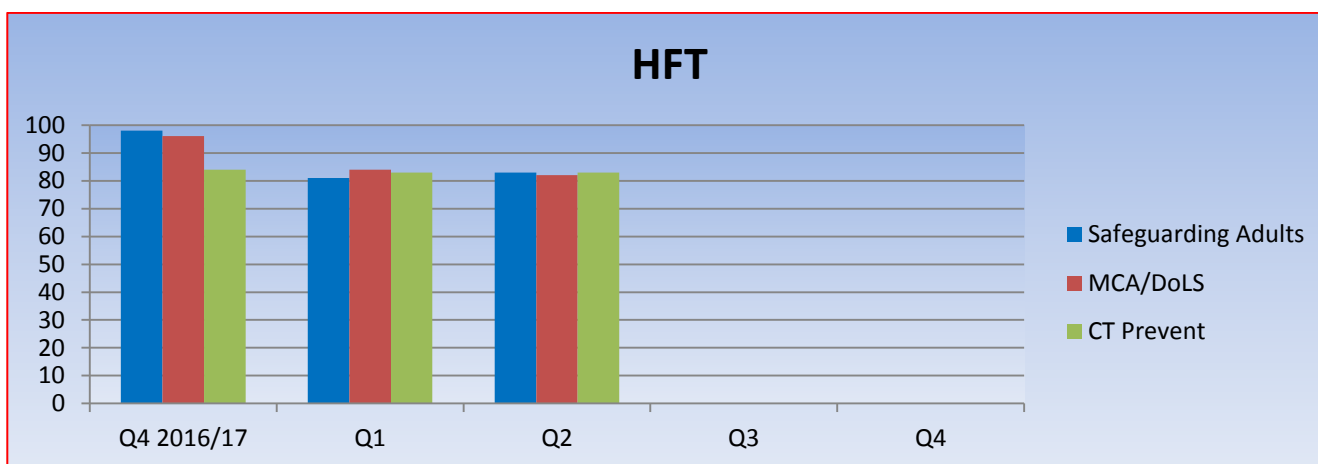
regarding challenges of Emergency Department staff release to attend workshops. The ACN advised the QDG that a meeting has been arranged to address this.

5. HUMBER NHS FOUNDATION TRUST (HFT)

5.1 Governance and Accountability

Training Compliance

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18
SG Adults	98%	81%	83%		
MCA/DoLS	96%	84%	82%		
CT Prevent	84%	83%	83%		



HFT have a Named Nurse for safeguarding adults, 2 safeguarding adult practitioners and a trainer for safeguarding adults to provide support and development for staff. Training compliance has improved from 2016/17 but remains close to contractual 80% standards reflected in a medium level of confidence in this report.

In 2016/17 HFT submitted a report for the HSAPB SAR and also for the DHR in Hull. HSAPB members have recently conducted a visit to HFT early in Q3 to obtain assurance of the implementation of current SAR recommendations. HFT continue to demonstrate involvement with all the subjects of SAR processes in Hull with each review highlighting areas for safeguarding adult improvements.

HFT continue to provide valuable support to the monthly CT prevent channel panels due to the high number of cases with mental health involvement. This process has seen the attendance of various levels of professionals up to and including consultant psychiatrists to advise on cases. HFT also provide attendance and support for every level 2 and level 3 MAPPA meeting as per duty to co-operate within MAPPA guidance.

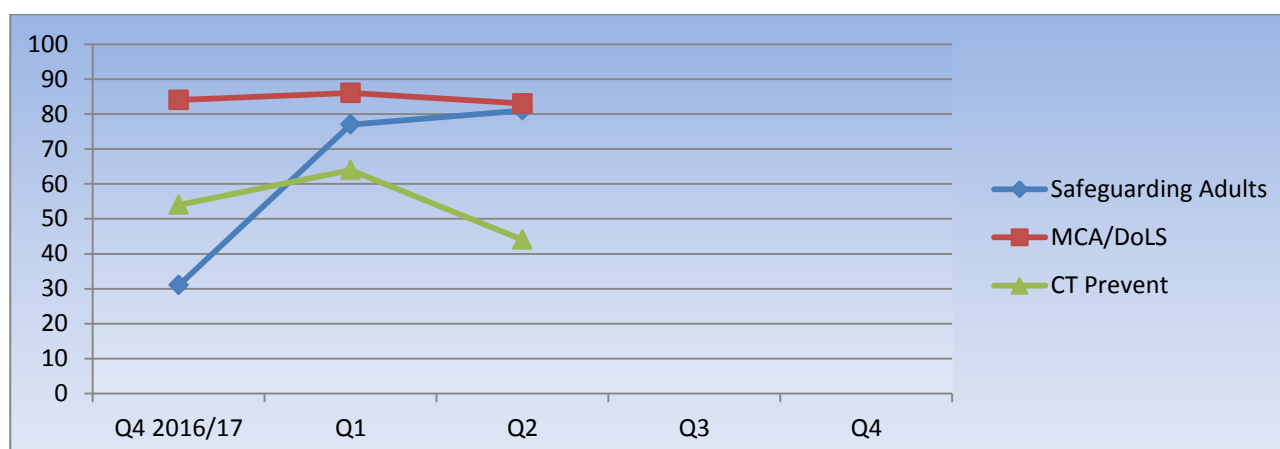
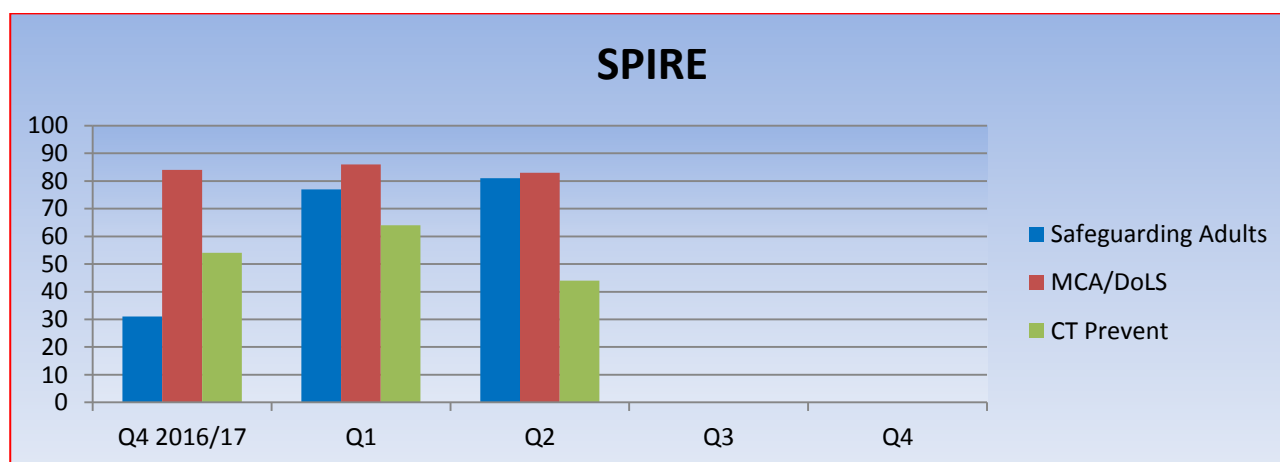
Training compliance demonstrated little progress or variance during Q2 but remains over and within contractual targets. Compliance had improved slightly to 85% by the end of October 2017.

6. SPIRE

6.1 Governance and Accountability

Training Compliance

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18
SG Adults	31%	77%	81%		
MCA/DoLS	84%	86%	83%		
CT Prevent	54%	64%	44%		



The current challenge remains for overall training compliance due to utilisation of a national training platform (Myrus) that only provides incremental reports between January to December each year.

CT Prevent training compliance is not recorded within Myrus, but is reported via quarterly returns to the CCG ensuring consistency with the other providers. SPIRE reviewed their training needs analysis so that training levels are now commensurate with NHS England CT prevent competency guidance. The review improved CT prevent compliance rates for Q1 but the latest report demonstrates a deterioration during Q2. SPIRE have stated a lack of available trainer to deliver any WRAP workshops for this drop in compliance. The following were discussed during the subsequent CMB meeting with SPIRE;

- What is the intention to deliver WRAP workshop training?
- What will SPIRE arrange if their current trainer is still not available?
- Will SPIRE re-engage with the CT prevent silver group who may be able to offer some training?
- SPIRE have been absent from recent CT prevent silver group meetings, why?

SPIRE provided assurances that further WRAP training was arranged and reported an improved compliance rate of 68% at the end of November 2017.

SPIRE are notified of all SAR's and DHR's but have had no involvement with any of the subjects of the current reviews in the Hull area so far.

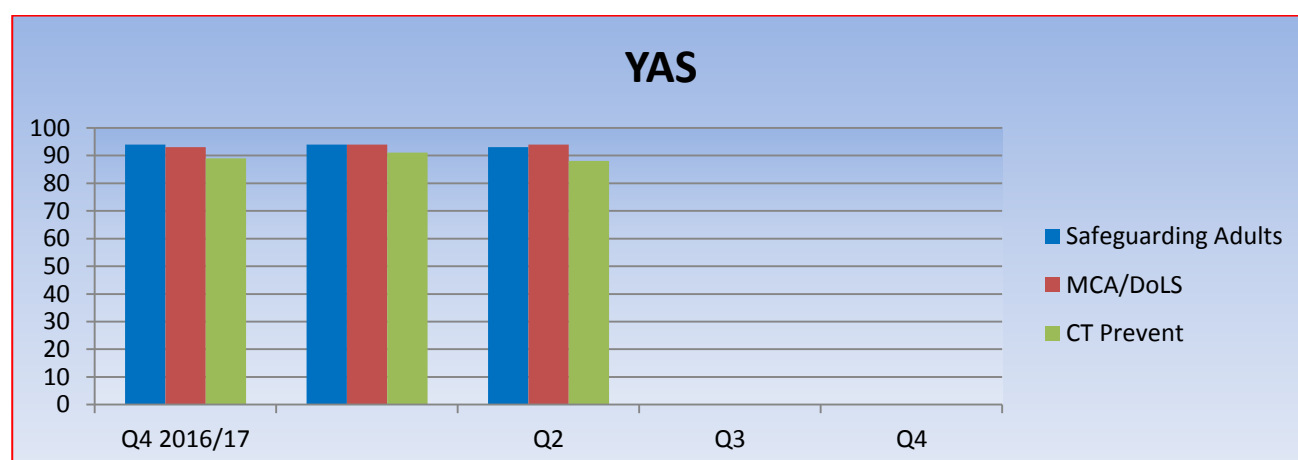
7. YORKSHIRE AMBULANCE SERVICE NHS TRUST (YAS)

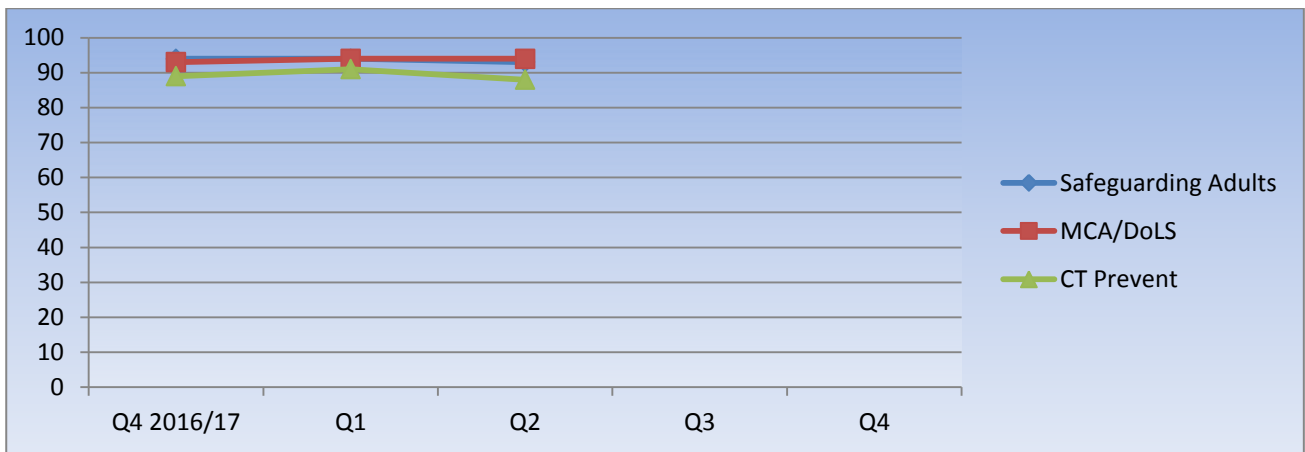
7.1 Governance and Accountability

Training Compliance

	Q4 2016/17	Q1 2017/18	Q2 2017/18	Q3 2017/18	Q4 2017/18
*SG Adults	94%	94%	93%		
*MCA/DoLS	93%	94%	94%		
*CT Prevent	89%	91%	88%		

** Regional figures*





YAS submitted a report for the HSAPB SAR in 2016/17. The report included recommendations for improving provision of mental health crisis services. The 999 communications centre now has a dedicated mental health nurse team to handle emergency calls relating to patients experiencing a crisis rather than immediate dispatch of an ambulance resource and conveyance to an Emergency Department (ED). Members of HSAPB have visited YAS HQ early in Q3 to observe the mental health team and gain assurance for the implementation of these recommendations.

Wakefield CCG are currently the lead commissioner for safeguarding in YAS. A Memorandum of Agreement (MOA) is in place that empowers all 44 CCG designated safeguarding leads to act as a conduit for YAS to all children's and adults safeguarding boards across the region.

The CQC inspection report published in February 2017, demonstrated a good judgement for safeguarding in YAS. NHS Hull CCG also continues to receive quality contract schedule reports for assurance that contain safeguarding activity and performance, and these demonstrate high levels of training compliance which is delivered via blended learning methodologies of face to face, e-learning and distance learning workbooks. Any issues with YAS are escalated and discussed with the Head of Safeguarding at Wakefield CCG, although this was not necessary in Q1 or Q2 of 2017/18.

8. PRIMARY CARE

8.1 The Named GP for safeguarding adults is 2 PA per week and the post holder is also currently the NHS Hull CCG clinical lead for dementia. During Q1 the Named GP for safeguarding adults tendered their resignation from the CCG safeguarding post. Recruitment for a replacement was completed in Q2 and a successful candidate accepted the offer of the position and began in December 2017. A safeguarding adult's policy bespoke for primary care is now fully drafted and will be tabled for approval at the primary care Q&P meeting in January 2018.

9. HULL SAFEGUARDING ADULTS PARTNERSHIP BOARD (HSAPB)

9.1 HSAPB continues to progress with the 4 year action plan following the Care Act 2014 guidance. NHS Hull CCG is represented on the HSAPB Executive Board, Strategic Delivery Group (SDG) and Systems, Accountability, Focus, Engagement (SAFE) sub group.

- 9.2 The CCG designated professional for safeguarding adults is currently the chair of the HSAPB SAFE group which has a focus on personal and organisational learning. The current action plan for the SAFE group includes quarterly audits in the MASH and supportive learning visits (SLV) are arranged to start in Q4 into each partner agency. The SLV process will facilitate learning for SAFE group members and visits will be completed utilising the organisational raid methodology with outcomes reported to the HSAPB executive group to provide further assurance from partner agencies.
- 9.3 HSAPB currently has 2 Safeguarding Adult Reviews (SAR) in progress. The first review was due for conclusion and publication in February 2017. The publication process was halted due to Humberside Police initiating a criminal investigation into the case, and this remained the current status in Q2. A new publication date is not available currently due to this development. No SI reports were escalated to the HSAPB for SAR consideration in Q2. A further 4 cases were discussed for consideration as SARs at the panel meeting in December 2017.

10. HULL UNIVERSITY PRE-REGISTRATION STUDENTS

- 10.1 2 further safeguarding days were delivered in August and September 2017 for year 2 pre-registration health students. This totalled 6 events altogether in 2017/18, with close to 200 health students attending the days. Delivery of safeguarding training at this stage of professional development ensures that students complete placements with safeguarding knowledge and are compliant with safeguarding training requirements at the start of employment with local health providers.

3 half day introduction to safeguarding (level 1) sessions were also delivered in Q2 for year 1 health students.

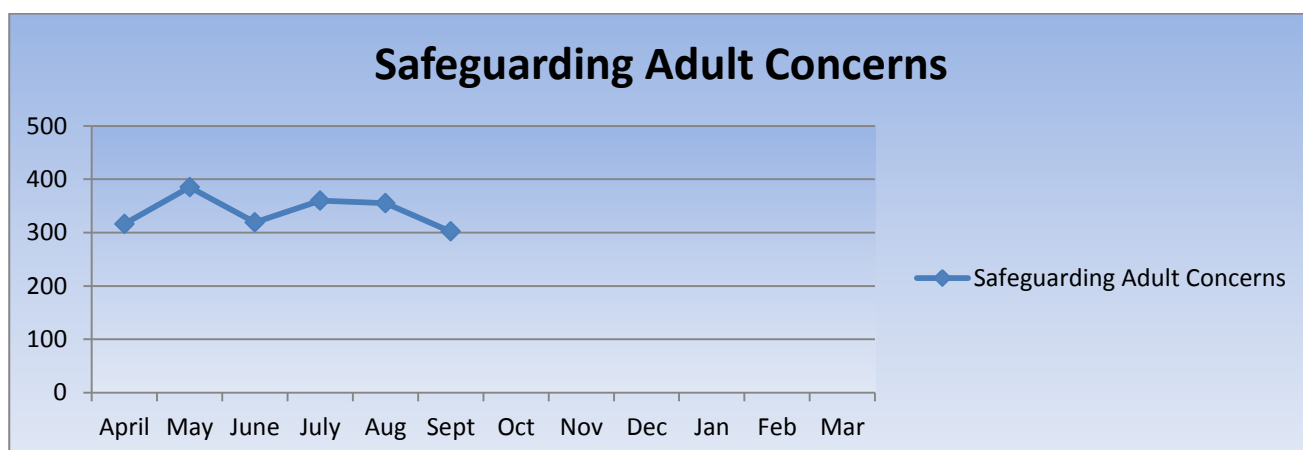
11. CT PREVENT SILVER GROUP AND CHANNEL PANELS

- 11.1 The CCG designated professional for safeguarding adults continues to attend the quarterly silver group and monthly channel panel to represent the NHS Hull CCG. Attendance ensures CCG compliance within legislative duties for the counter terrorism act 2015 and the opportunity to further monitor what health providers are delivering to support CT prevent processes. Attendance by the CCG and health providers ensures local intelligence is shared re current CT issues in the city and CT prevent policies are consistent with needs of vulnerable children and adults who are potential or actual victims of grooming from extremists or radicalisers.
- 11.2 The Hull CCG designated professional is currently the chair of the local prevent training forum designed to share learning and resources with all partner agencies involved in the 4 local CT prevent silver groups. Two meetings were completed in Q2 involving further and higher education institutions in the area, local police, armed forces and local authorities. New resources are consistently shared and 2 multi agency workshops have been arranged for Q3 to further improve understanding of extremism and delivering British values.
- 11.3 Every CCG has received correspondence from NHS England notifying of increased focus on CT prevent following recent events in London and Manchester. This includes an expectation that all agencies are fully compliant with prevent duties by the end of Q4 2017/18. The Q&P committee received a full report in relation to current status of CT prevent in December 2017.

12. HULL SAFEGUARDING ADULTS MULTI AGENCY SAFEGUARDING HUB (MASH)

- 12.1 During Q2 the MASH received a total of 1017 safeguarding concerns from agencies, professionals and members of the public in the city. This is very consistent with 1020 received during Q1. An audit was completed in Q2 that focussed on concerns referred to the MASH by Humberside Police, who are the leading referring agency in the city. Feedback from the sample audit of 10% of documents when completed will be shared with the Police Protecting Vulnerable People Unit (PVPU) to inform quality of future referrals.

	April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
2017/18	316	385	319	360	355	302						

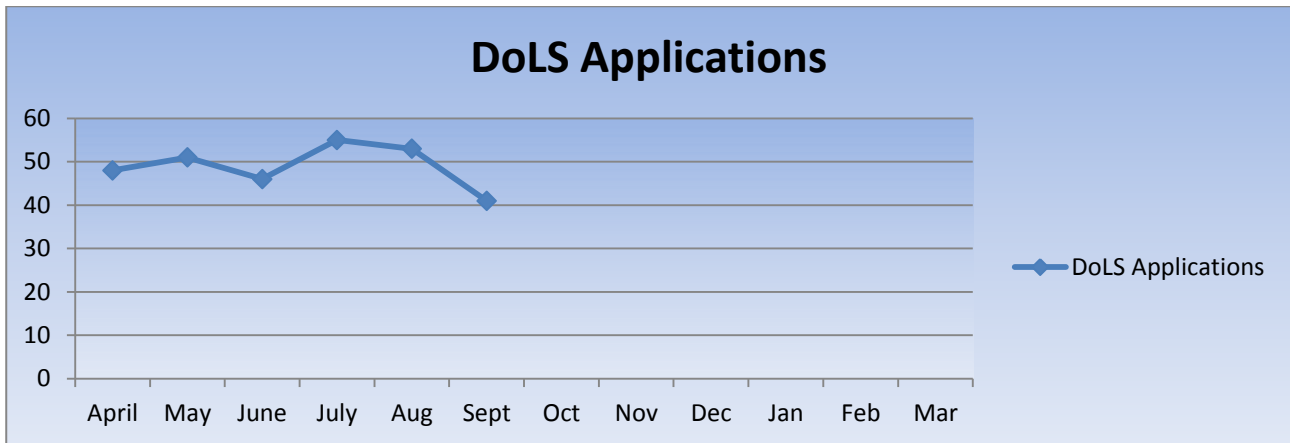


13. DEPRIVATION OF LIBERTY SAFEGUARDS (DoLS)

- 13.1 DoLS applications continue to provide a logistical challenge nationally for local authorities who handle applications as the supervisory body for the process. There is now a WTE DoLS co-ordinator and a WTE DoLS administrator working within the MASH following a review during 2016/17.

A House of Commons briefing paper is anticipated in Q3 that will provide an update of the Law Commission's recommendations for changes to the DoLS process and supporting legislation. NHS Hull CCG has DoLS registered as a risk due to the current delay in processing applications and potential for challenge during this relating to illegal detentions.

	April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
2017/18	48	51	46	55	53	41						



14. RECOMMENDATIONS

It is recommended that the NHS Hull CCG Board note this report on the current status of safeguarding adults.

ABBREVIATIONS

ACN	Assistant Chief Nurse
CHCP	Community Health Care Partnership
CMB	Contract Management Board
CQF	Clinical Quality Forum
DHR	Domestic Homicide Review
DoLS	Deprivation of Liberty Safeguards
ED	Emergency Department
GP	General Practitioner
HEY	Hull and East Yorkshire Hospitals
HFT	Humber NHS Foundation Trust
HLG	Health Liaison Group
HSAPB	Hull Safeguarding Adults Partnership Board
MAPP	Multi Agency Public Protection Arrangements
MCA	Mental Capacity Act
MHCCC	Mental Health Crisis Care Concordat
MoA	Memorandum of Agreement
PVPU	Protecting Vulnerable People Unit
QDG	Quality Delivery Group
RCGP	Royal College of General Practitioners
SAFE	Systems, Accountability, Focus, Engagement
SAR	Safeguarding Adult Review
SDG	Strategic Delivery Group
SI	Serious Incidents
SI	Serious Incident
WRAP	Workshop to Raise Awareness of Prevent
WTE	Whole Time Equivalent
YAS	Yorkshire Ambulance Service