

Report to:



Item: 8.5

| Date of Meeting:   | 24 November 2017   |                          |  |  |  |
|--|--|--------------------------|--|--|--|
| Subject:   | Safeguarding Adults Quarterly Update (Q1)  |                          |  |  |  |
| Presented by: Author:                                      | Sarah Smyth, Director of Quality & Clinical Governance / Executive Nurse Dave Blain, Designated Professional for Safeguarding Adults Dave Blain, Designated Professional for Safeguarding Adults   |                          |  |  |  |
| STATUS OF THE R  | EPORT:   |                          |  |  |  |
| To approv  | /e To endorse  |                          |  |  |  |
| To ratify  | To discuss   |                          |  |  |  |
| To consid  | er For information   |                          |  |  |  |
| To note  | X  |                          |  |  |  |
| arrangement: To demonstrate duties in related 2012 and the | quarterly update to the NHS Hull CCG Board in regard to a across the Hull area.  ate how NHS Hull CCG, and commissioned providers, are tion to safeguarding adults in accordance with the Health Care Act 2014  ENCE:  Commissioning Group (CCG) | e fulfilling legislative |  |  |  |
| PROCESS  |  | Doting                   |  |  |  |
| There is a <b>MEDIUN</b>                                   | level of confidence in NHS Hull CCG discharging it's safeguarding adults.  | Rating Medium            |  |  |  |
|  | I level of confidence in NHS Hull CCG discharging it's safeguarding adults.  | Medium                   |  |  |  |
|  |  |                          |  |  |  |

NHS Hull Clinical Commissioning Group Board

# **Hull & East Yorkshire Hospitals (HEY)**

| PROCESS  | Rating |
|--|--------|
| There is a <b>MEDIUM</b> level of confidence in HEY discharging it's duties in | Medium |
| relation to safeguarding adults.   |        |
|  |        |
| PERFORMANCE  |        |
| There is a <b>MEDIUM</b> level of confidence in HEY discharging it's duties in | Medium |
| relation to safeguarding adults.   |        |

# **Humber Foundation Trust (HFT)**

| PROCESS   | Rating |
|---|--------|
| There is a <b>MEDIUM</b> level of confidence in HFT discharging it's duties in                                  | Medium |
| relation to safeguarding adults.  |        |
|   |        |
| PERFORMANCE   |        |
| There is a <b>MEDIUM</b> level of confidence in HFT discharging it's duties in relation to safeguarding adults. | Medium |

# **City Health Care Partnership (CHCP)**

| PROCESS   | Rating |
|---|--------|
| There is a <b>MEDIUM</b> level of confidence in CHCP discharging it's duties in | Medium |
| relation to safeguarding adults.  |        |
|   |        |
| PERFORMANCE   |        |
| There is a <b>MEDIUM</b> level of confidence in CHCP discharging it's duties in | Medium |
| relation to safeguarding adults.  |        |

#### **SPIRE**

| PROCESS  | Rating |
|--|--------|
| There is a <b>MEDIUM</b> level of confidence in SPIRE discharging it's duties in | Medium |
| relation to safeguarding adults.   |        |
|  |        |
| PERFORMANCE  |        |
| There is a <b>MEDIUM</b> level of confidence in SPIRE discharging it's duties in | Medium |
| relation to safeguarding adults.   |        |

# YORKSHIRE AMBULANCE SERVICE (YAS)

| PROCESS   | Rating |
|---|--------|
| There is a <b>HIGH</b> level of confidence in YAS discharging it's duties in relation to safeguarding adults. | High   |
|   |        |
| PERFORMANCE   |        |
| There is a <b>HIGH</b> 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 consider 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 D | 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.

| IMPLICATIO | 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.

|  | Tick<br>relevant<br>box |
|--|-------------------------|
| An Equality Impact Analysis/Assessment is not required for this report.  | Х                       |
| 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.

#### Q1 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<br>2016/17 | Q1<br>2017/18 | Q2<br>2017/18 | Q3<br>2017/18 | Q4<br>2017/18 |
|--------------------|---------------|---------------|---------------|---------------|---------------|
| SG Adults          | 53%           | 52%           |               |               |               |
| CT Prevent<br>WRAP | 84%           | 82%           |               |               |               |

Safeguarding training compliance for CCG employees demonstrated a continued low compliance at the start of Q1 following transfer of provision and migration of the monitoring process to the Electronic Staff Records (ESR) system. CCG staff continued to experience difficulty in accessing the system to complete the safeguarding adult's module. Further work was completed with Embed and face to face training arranged and delivered to begin to address these concerns against the CCG target of 95%. Three further face to face safeguarding adult sessions were arranged for delivery in Q2 to further an increase in compliance. This also included a safeguarding adults session planned for the CCG board development day in Q2. 1 workshop to raise awareness of prevent (WRAP) face to face session was also arranged in May 2017 for staff to attend who could not access the module on ESR.

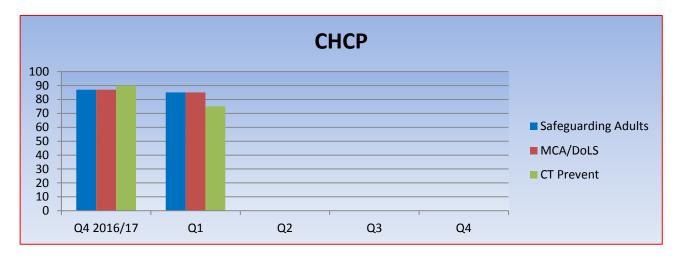
Provider self- declarations - As per the NHS England Accountability and Assurance Framework "Safeguarding forms part of the NHS standard contract (service condition 32) and commissioners will need to agree with their providers, through local negotiation, what contract monitoring processes are used to 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).

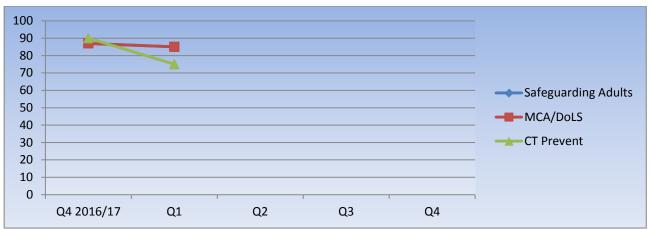
# 3. CITY HEALTH CARE PARTNERSHIP (CHCP)

## 3.1 Governance and Accountability

# **Training Compliance**

|            | Q4<br>2016/17 | Q1<br>2017/18 | Q2<br>2017/18 | Q3<br>2017/18 | Q4<br>2017/18 |
|------------|---------------|---------------|---------------|---------------|---------------|
| SG Adults  | 87%           | 85%           |               |               |               |
| MCA/DoLS   | 87%           | 85%           |               |               |               |
| CT Prevent | 90%           | 75%           |               |               |               |





CHCP continued to provide safeguarding adults practitioners for health support within the Multi Agency Safeguarding Hub (MASH) via a contract variation. CHCP compliance demonstrated a drop for Counter Terrorism (CT) prevent training in Q1 due to new levels of staffing within the organisation. The prevent WRAP workshop is delivered as part of corporate induction 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 is being demonstrated in Q2. CHCP continued to report levels of safeguarding adult and MCA training compliance within contractual standards.

The CCG safeguarding specification with CHCP has been reviewed and updated to include safeguarding adults references, and was tabled as an agenda item at the NHS Hull CCG Planning and Commissioning Committee on 03/05/17. CHCP have agreed to the changes in the service specification and will begin to deliver

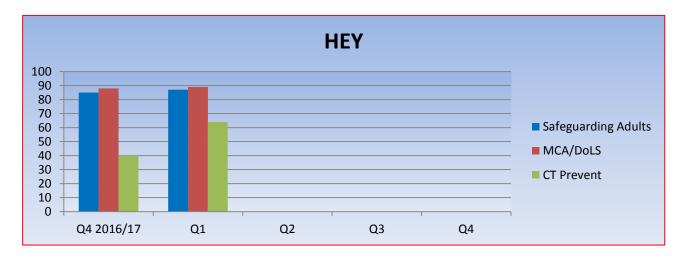
safeguarding adults training for primary care in Q3 at a level consistent with current provision for safeguarding children.

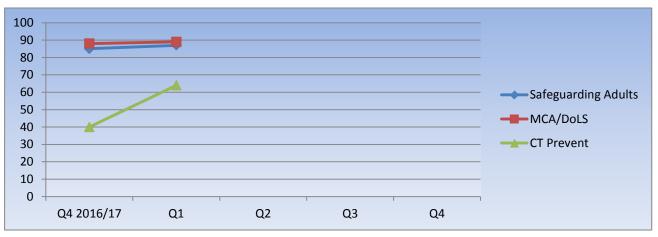
## 4. HULL AND EAST YORKSHIRE HOSPITALS TRUST (HEY)

# 4.1 Governance and Accountability

## **Training Compliance**

|            | Q4<br>2016/17 | Q1<br>2017/18 | Q2<br>2017/18 | Q3<br>2017/18 | Q4<br>2017/18 |
|------------|---------------|---------------|---------------|---------------|---------------|
| SG Adults  | 85%           | 87%           |               |               |               |
| MCA/DoLS   | 88%           | 89%           |               |               |               |
| CT Prevent | 40%           | 64%           |               |               |               |





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 are engaged with the HSAPB and are represented at all levels on various groups.

HEY continued to be involved in current HSAPB SARs and have established recommendations for improving safeguarding adults within the trust. Members of the HSAPB will visit the trust in Q3 for assurance that recommendations are being implemented.

The ACN has established a process to review all serious incidents (SI) for safeguarding issues to provide further assurance that adults with care and support needs are highlighted for internal investigations. Any safeguarding issues that are highlighted within the SI panel process are also discussed by the CCG designated professional for safeguarding adults and ACN during bi-monthly meetings. The implementation and understanding of mental capacity act and consent were highlighted from reports and these were shared and discussed with HEY during Q1.

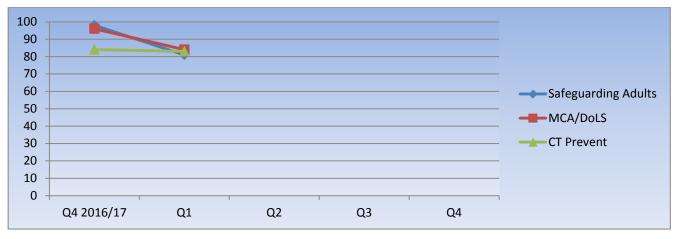
# 5. HUMBER NHS FOUNDATION TRUST (HFT)

## 5.1 Governance and Accountability

## **Training Compliance**

|            | Q4<br>2016/17 | Q1<br>2017/18 | Q2<br>2017/18 | Q3<br>2017/18 | Q4<br>2017/18 |
|------------|---------------|---------------|---------------|---------------|---------------|
| SG Adults  | 98%           | 81%           |               |               |               |
| MCA/DoLS   | 96%           | 84%           |               |               |               |
| CT Prevent | 84%           | 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.

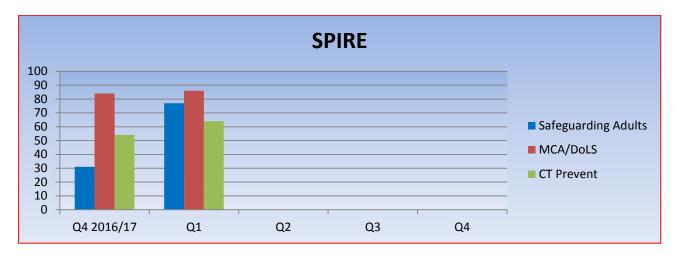
In 2016/17 HFT submitted a report for the HSAPB SAR and also for the DHR in Hull. Although minimal engagement for the DHR, the SAR demonstrates significant involvement in the case. HSAPB members will conduct visits to HFT in Q2 and Q3 to observe implementation of the SAR recommendations.

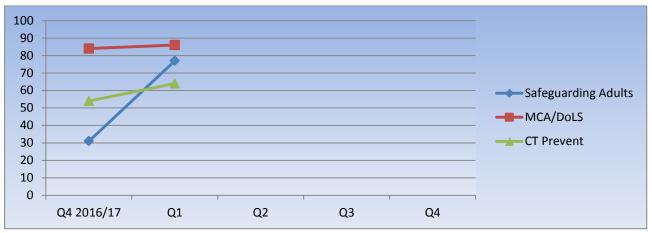
#### 6. SPIRE

## 6.1 Governance and Accountability

## **Training Compliance**

|            | Q4<br>2016/17 | Q1<br>2017/18 | Q2<br>2017/18 | Q3<br>2017/18 | Q4<br>2017/18 |
|------------|---------------|---------------|---------------|---------------|---------------|
| SG Adults  | 31%           | 77%           |               |               |               |
| MCA/DoLS   | 84%           | 86%           |               |               |               |
| CT Prevent | 54%           | 64%           |               |               |               |





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. Compliance demonstrated slow progress during 2016/17. However, 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.

SPIRE have had no involvement with any of the subjects of the SARs or DHRs in the Hull area so far.

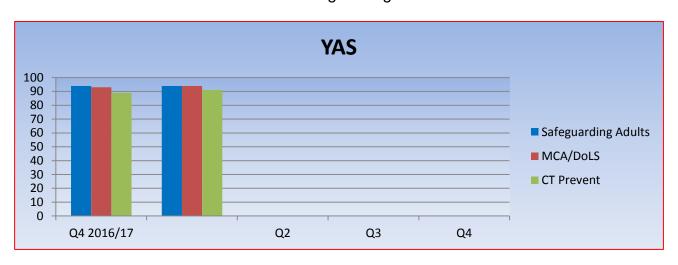
# 7. YORKSHIRE AMBULANCE SERVICE NHS TRUST (YAS)

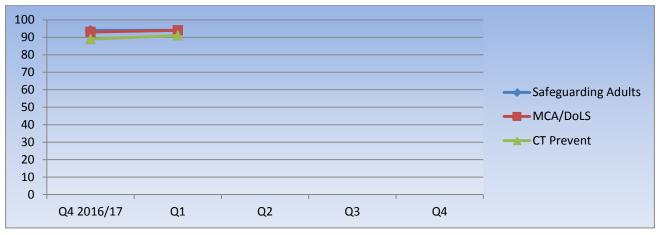
# 7.1 Governance and Accountability

## **Training Compliance**

|             | Q4<br>2016/17 | Q1<br>2017/18 | Q2<br>2017/18 | Q3<br>2017/18 | Q4<br>2017/18 |
|-------------|---------------|---------------|---------------|---------------|---------------|
| *SG Adults  | 94%           | 94%           |               |               |               |
| *MCA/DoLS   | 93%           | 94%           |               |               |               |
| *CT Prevent | 89%           | 91%           |               |               |               |

# \* 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 arranged to visit YAS HQ in Q3 to gain assurance of 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 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 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 will be completed in Q2. A draft safeguarding adults policy bespoke for primary care in Hull was also developed and circulated for comments towards the end of Q1. The draft had been delayed waiting for the publication of a new safeguarding adults toolkit from the Royal College of General Practitioners (RCGP). The latest advice from the RCGP publication has been incorporated into a further iteration of the draft of the primary care guidance. The Named GP continues to support any primary care reports that are authored for multi-agency safeguarding reviews and monitors any subsequent action plans to completion.

## 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 for 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 Q1. A new publication date is not available currently due to this development. 1 SI report was escalated to the

HSAPB for consideration as an SAR in Q4 of 2016/17, regarding the death of a patient following discharge from a local mental health unit. It was agreed in Q1 of 2017/18 that the case did meet the threshold for a SAR and work has begun on collation of information and reports for the review from providers and primary care. A further 4 cases were pending for review in Q1 for consideration as SARs.

9.4 A regional modern day slavery conference was held on 24<sup>th</sup> May 2017 in Cottingham that attracted over 100 attendees from the Yorkshire and Humber region. This included delegates form all health providers and primary care in the area. All local health providers remain engaged as members of the Humber Modern Slavery Partnership and provide staff training on the subject within safeguarding curricula.

## 10. HULL UNIVERSITY PRE-REGISTRATION STUDENTS

10.1 The second of 4 safeguarding days was delivered to 92 pre-registration students at Hull University in Q1 with colleagues from neighbouring CCGs and provider trusts. 2 more are also planned in August and September 2017. 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.

## 11. CT PREVENT SILVER GROUP AND CHANNEL PANELS

- 11.1 The CCG designated professional for safeguarding children 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 During Q1 Humberside Police completed further structural changes resulting in a new chair for CT silver groups in the region. The new chair requested that a training forum was established across the Humberside area as a sub group of the North and South Humber CT prevent silver groups. The Hull CCG designated professional is currently the chair of this new group designed to share learning and resources with all partner agencies involved in the local CT prevent silver groups. One meeting was completed in Q1 involving further and higher education institutions in the area. Outcomes are focussed on achieving consistent delivery of CT education across the region.

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

12.1 During Q1 the MASH received a total of 1020 safeguarding concerns from agencies, professionals and members of the public in the city. Concerns had initially increased in 2015/16 following publication of the Care Act and continued throughout 2016/17, but have now established an elevated but mean level of 340-350 per month. Further audit work of concerns raised with the MASH is being completed by members of the HSAPB SAFE group each quarter to feedback to

agencies and referrers. An audit is planned for Q2 to focus 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.

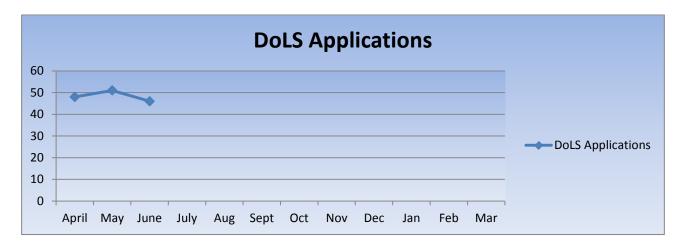
|         | April | May | Jun | July | Aug | Sept | Oct | Nov | Dec | Jan | Feb | Mar |
|---------|-------|-----|-----|------|-----|------|-----|-----|-----|-----|-----|-----|
| 2017/18 | 316   | 385 | 319 |      |     |      |     |     |     |     |     |     |



# 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.

|         | April | May | Jun | July | Aug | Sept | Oct | Nov | Dec | Jan | Feb | Mar |
|---------|-------|-----|-----|------|-----|------|-----|-----|-----|-----|-----|-----|
| 2017/18 | 48    | 51  | 46  |      |     |      |     |     |     |     |     |     |



#### 14. RECOMMENDATIONS

It is recommended that the NHS Hull CCG Board note this report for information on current status.

# **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 Foundation Trust HLG Health Liaison Group

HSAPB Hull Safeguarding Adults Partnership Board MAPPA Multi Agency Public Protection Arrangements

MCA Mental Capacity Act

MHCCC Mental Health Crisis Care Concordat

MoA Memorandum of Agreement 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 SDG Strategic Delivery Group

SI Serious Incidents SI Serious Incident

WRAP Workshop to Raise Awareness of Prevent WRAP Workshop to Raise Awareness of Prevent

WTE Whole Time Equivalent

YAS Yorkshire Ambulance Service