

<b>Report to:</b>	NHS Hull Clinical Commissioning Group Board
<b>Date of Meeting:</b>	23 March 2018
<b>Title of Report:</b>	Safeguarding Adults Quarterly Update (Q3) 2017-18
<b>Presented by:</b>	Dave Blain – Designated Professional for Safeguarding Adults
<b>Author:</b>	Dave Blain – Designated Professional for Safeguarding Adults

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

<b>PURPOSE OF REPORT:</b>	
<ul style="list-style-type: none"> <li>To provide a quarterly update to the NHS Hull CCG Board in regard to safeguarding adults arrangements across the Hull area.</li> <li>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</li> </ul>	
<b>LEVEL OF CONFIDENCE:</b>	
<b>NHS Hull Clinical Commissioning Group (CCG)</b>	
<b>PROCESS</b>	Rating
There is a <b>HIGH</b> level of confidence in NHS Hull CCG discharging it's duties in relation to safeguarding adults via current robust systems and processes in place with all safeguarding roles compliant with national guidance and partnership working with safeguarding adult boards.	<b>High</b>
<b>PERFORMANCE</b>	
There is a <b>HIGH</b> level of confidence in NHS Hull CCG discharging it's duties in relation to safeguarding adults. The CCG is fulfilling all statutory and legislative duties for safeguarding adults with improving compliance for safeguarding adults training for CCG staff.	<b>High</b>
<b>Hull &amp; East Yorkshire Hospitals (HEY)</b>	
<b>PROCESS</b>	Rating
There is a <b>MEDIUM</b> level of confidence in HEY discharging it's duties in relation to safeguarding adults.	<b>Medium</b>

<b>PERFORMANCE</b>	
There is a <b>MEDIUM</b> level of confidence in HEY discharging it's duties in relation to safeguarding adults due to stagnation in compliance with training requirements for safeguarding adults.	<b>Medium</b>

### Humber Foundation Trust (HFT)

<b>PROCESS</b>	Rating
There is a <b>MEDIUM</b> level of confidence in HFT discharging it's duties in relation to safeguarding adults due to safeguarding reviews and serious incidents highlighting delayed admissions and premature discharges for vulnerable people.	<b>Medium</b>
<b>PERFORMANCE</b>	
There is a <b>MEDIUM</b> level of confidence in HFT discharging it's duties in relation to safeguarding adults due to training compliance remaining close to contractual targets with little progress.	<b>Medium</b>

### City Health Care Partnership (CHCP)

<b>PROCESS</b>	Rating
There is a <b>HIGH</b> level of confidence in CHCP discharging it's duties in relation to safeguarding adults via assurance provided within CCG safeguarding self-assessment processes.	<b>High</b>
<b>PERFORMANCE</b>	
There is a <b>HIGH</b> level of confidence in CHCP discharging it's duties in relation to safeguarding adults with consistent training compliance levels well above contractual targets.	<b>High</b>

### SPIRE

<b>PROCESS</b>	Rating
There is a <b>LOW</b> level of confidence in SPIRE discharging it's duties in relation to safeguarding adults due to lack of engagement with local multi agency processes or safeguarding issues being recognised/raised.	<b>Low</b>
<b>PERFORMANCE</b>	
There is a <b>LOW</b> level of confidence in SPIRE discharging it's duties in relation to safeguarding adults due to poor engagement and training for CT prevent processes .	<b>Low</b>

### YORKSHIRE AMBULANCE SERVICE (YAS)

<b>PROCESS</b>	Rating
There is a <b>HIGH</b> level of confidence in YAS discharging it's duties in relation to safeguarding adults due to CQC ratings and assurances from lead CCG for YAS.	<b>High</b>
<b>PERFORMANCE</b>	
There is a <b>HIGH</b> level of confidence in YAS discharging it's duties in relation to safeguarding adults with consistently high levels of training compliance and involvement in multi-agency safeguarding reviews.	<b>High</b>

**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.

## Q3 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 multi-agency safeguarding adult's reviews (SAR) and Domestic Homicide Reviews (DHR).

### 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%	82%	
CT Prevent WRAP	84%	82%	84%	87%	

Safeguarding adults training compliance for CCG employees demonstrated a low compliance at the start of Q1, 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 adults session as part of the CCG board development day in Q2. A further Counter Terrorism (CT) Prevent Workshop to Raise Awareness of Prevent (WRAP) was delivered in December 2017 to provide all CCG staff a further opportunity to gain or refresh compliance.

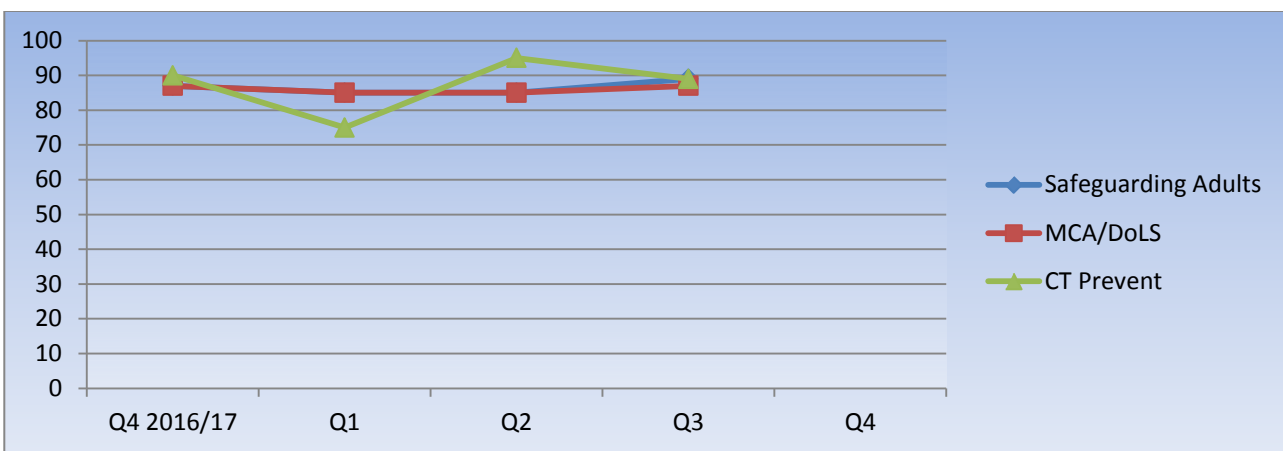
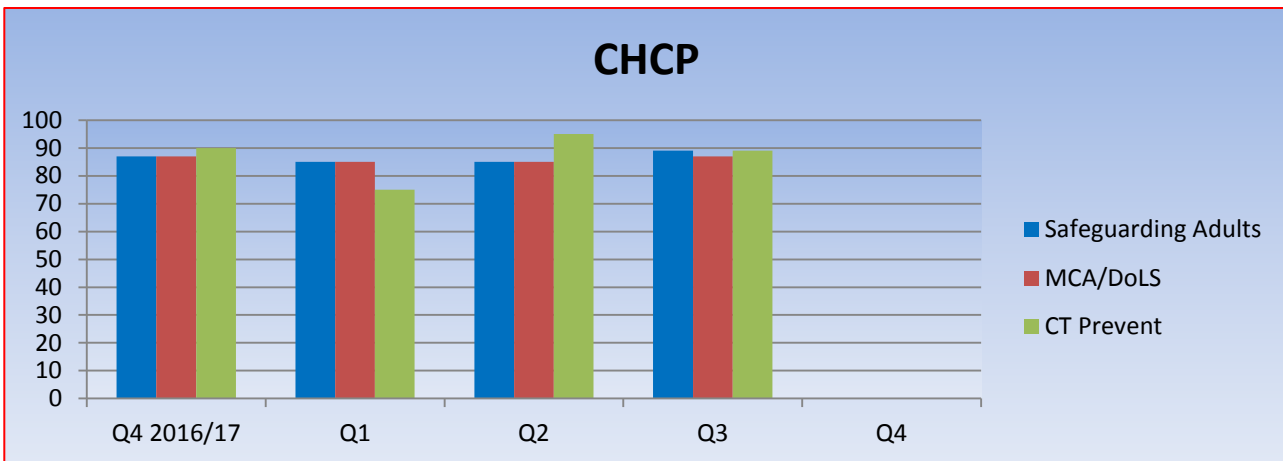
Provider self- declarations - As per the NHS England Accountability and Assurance Framework "Safeguarding forms part of the NHS standard contract (service condition 32) and commissioners will need to agree with their providers, through local negotiation, what contract monitoring processes are used to 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%	89%	
MCA/DoLS	87%	85%	85%	87%	
CT Prevent	90%	75%	95%	89%	



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 and maintained in Q3. 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

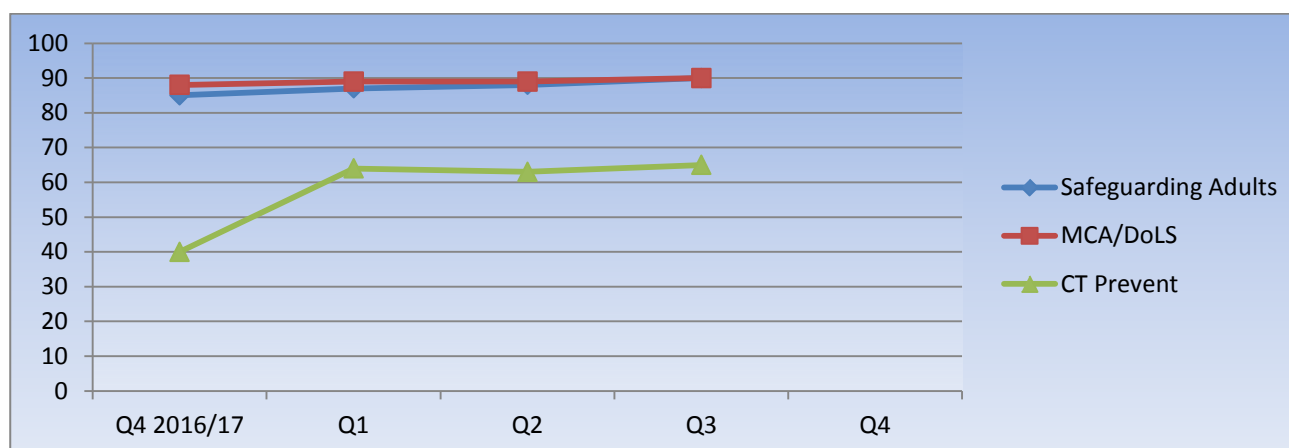
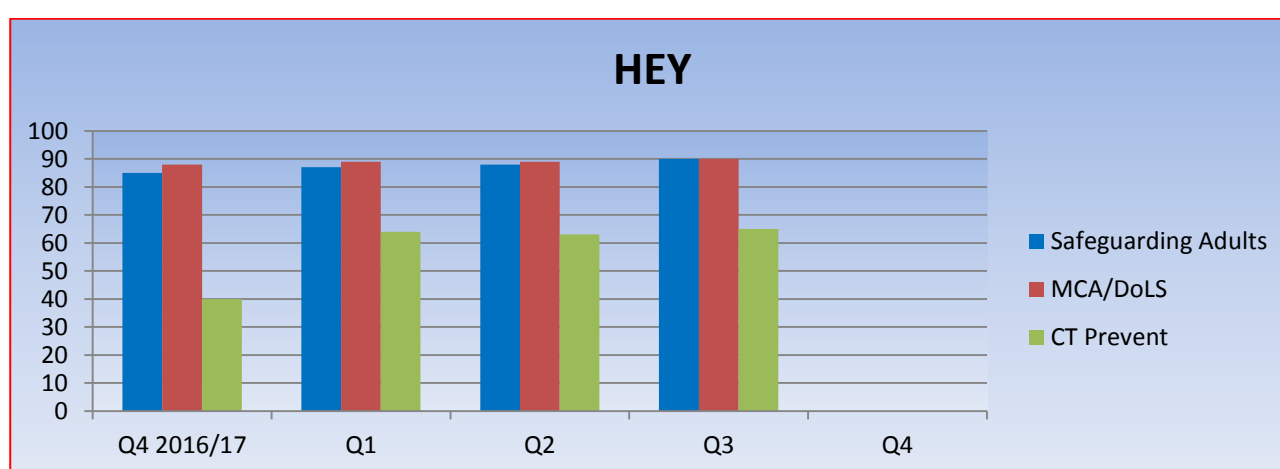
staff at a level consistent with current provision for safeguarding children in 2018/19 supported by the CCG Named GP for safeguarding adults. CHCP are fully engaged with all current SAR's and DHR's in the city.

#### 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%	90%	
MCA/DoLS	88%	89%	89%	90%	
CT Prevent	40%	64%	63%	65%	



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.

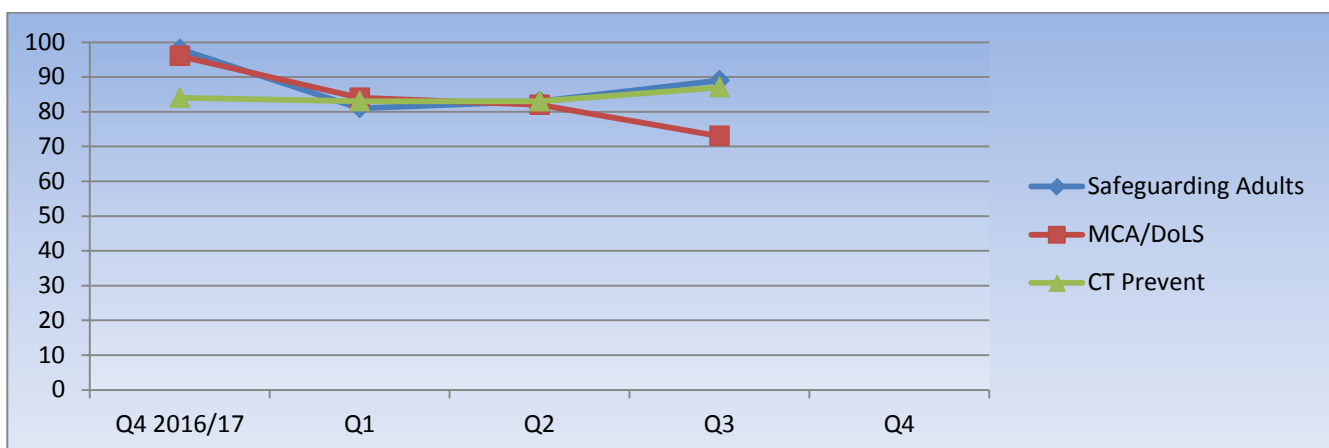
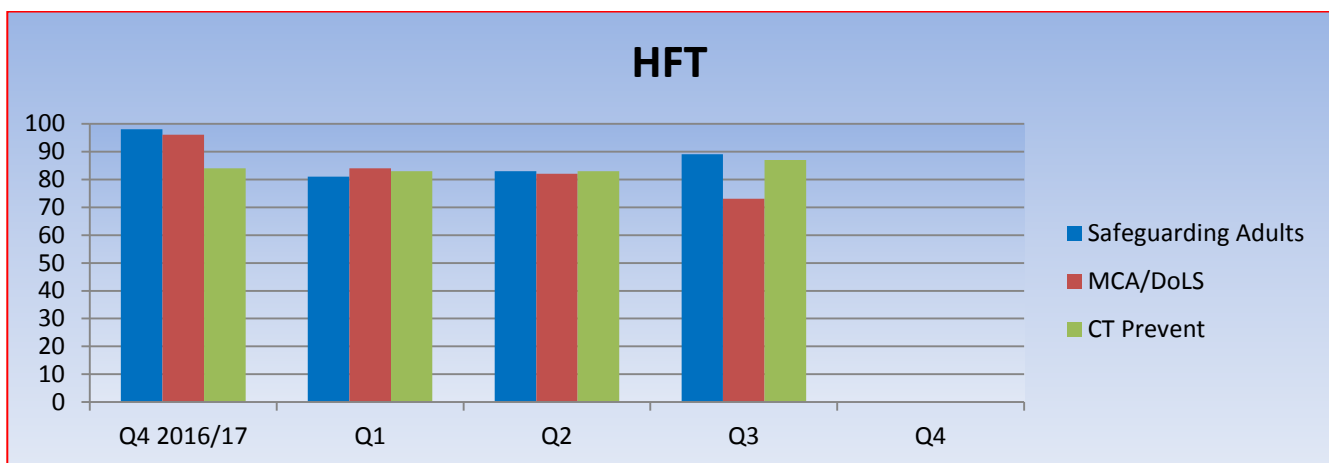
HEY has demonstrated a stagnation of progress with training compliance during Q3 citing operational demands negating staff release for attendance at training sessions. This is being addressed and monitored via conversations at the QDG and HEY are looking at resolving the CT Prevent issue via e-learning.

## 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%	89%	
MCA/DoLS	96%	84%	82%	73%	
CT Prevent	84%	83%	83%	87%	



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 however progress is slow and remains close to contractual 80% standards reflected in a medium level of confidence in this report. MCA/DoLS in Q3 demonstrates a deterioration in compliance from Q1 and this will be raised at the next QDG meeting.

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



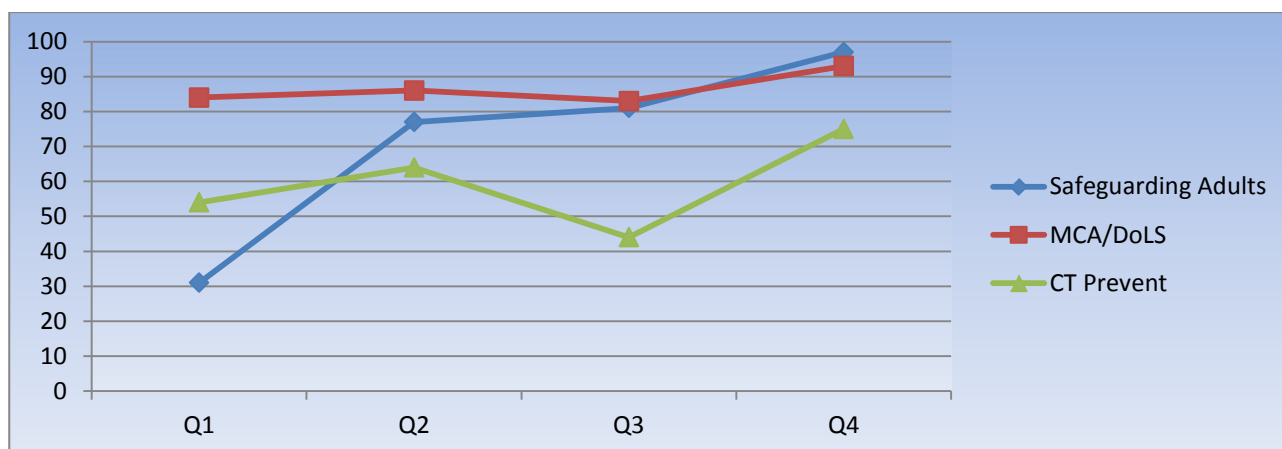
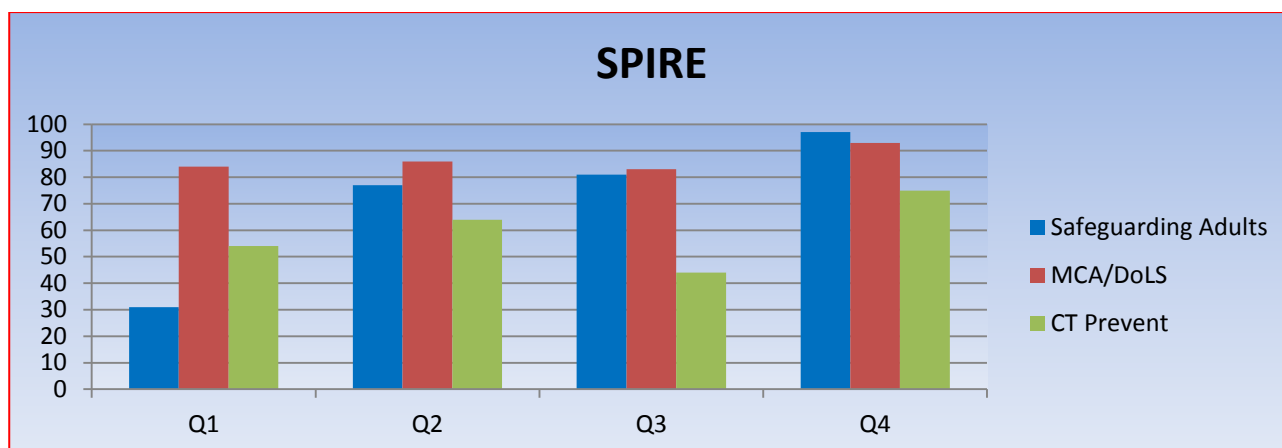
assurance of the implementation of current SAR recommendations. HFT continue to provide valuable support to the monthly CT prevent channel panels due to the high number of cases with mental health involvement. This process has seen the attendance of various levels of professionals up to and including 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 national guidance. Work will begin in Q4 to review and improve discharge processes for in-patients with mental health issues that are also referred to the CT prevent channel process.

## 6. SPIRE

### 6.1 Governance and Accountability

#### Training Compliance

	Q1 Jan-Mar	Q2 April-June	Q3 Jul-Sept	Q4 Oct-Dec
SG Adults	31%	77%	81%	97%
MCA/DoLS	84%	86%	83%	93%
CT Prevent	54%	64%	44%	75%



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. This report contains the year end performance for SPIRE.

CT Prevent training compliance is not recorded within Myrus, but is reported via quarterly returns to the CCG ensuring consistency with the other providers. In 2016/17 SPIRE reviewed their training needs analysis so that training levels are now commensurate with NHS England CT prevent competency guidance. Q1 to Q3 demonstrated poor compliance and formed part of quality and contracting discussions regarding the lack of progress. End of Q4 compliance now demonstrates a 31% increase from Q3 following facilitation of further WRAP workshops.

SPIRE have also completed the CCG quarterly safeguarding self-assessment which highlighted lack of involvement with CT Prevent silver group as per contractual requirements. This also has been discussed via CMB processes to increase attendance at meetings.

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.

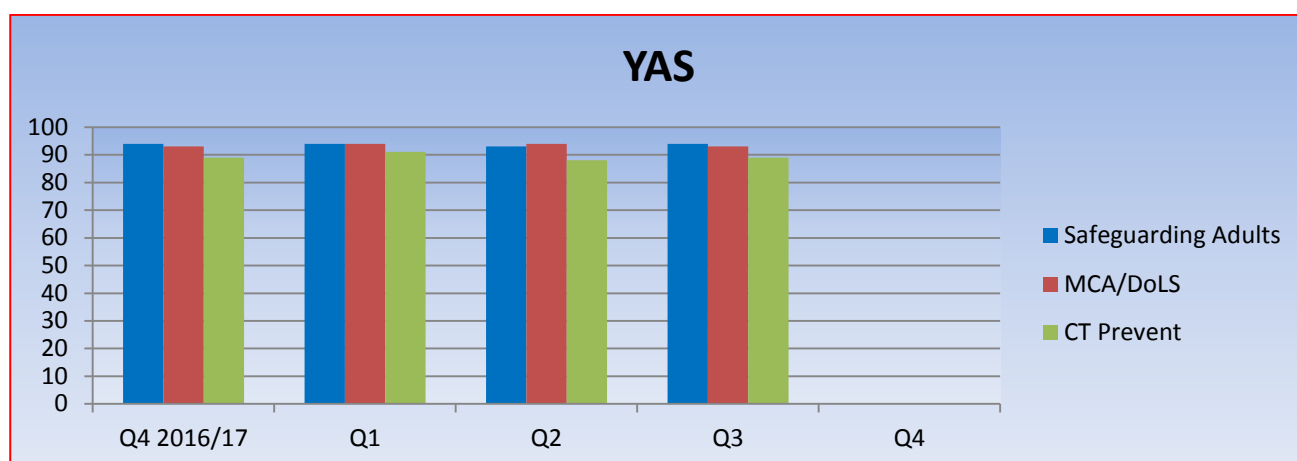
## 7. YORKSHIRE AMBULANCE SERVICE NHS TRUST (YAS)

### 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%	94%	
*MCA/DoLS	93%	94%	94%	93%	
*CT Prevent	89%	91%	88%	89%	

*\* 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.

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, Q2 or Q3 of 2017/18.

## 8. PRIMARY CARE

8.1 The Named GP for safeguarding adults is 2 PA per week and during Q3 a new GP began in post following the resignation of the previous post holder. The new GP is currently completing induction processes and attending specific training to increase knowledge of the safeguarding adults agenda. A safeguarding adults policy bespoke for primary care based on the Royal College of General Practitioners (RCGP) latest guidance, was tabled for approval at the Hull CCG primary care Q&P meeting in December 2017. Some minor adjustments were requested for approval and the policy will be shared for noting at the next available primary care commissioning committee in Q4 prior to circulation with all practices in the city.

The Hull CCG designated professional for safeguarding adults is also meeting with lead practice nurses during Q4 to discuss forward plans to deliver safeguarding adults training to this cohort of professionals in 2018/19.

## 9. HULL SAFEGUARDING ADULTS PARTNERSHIP BOARD (HSAPB)

9.1 HSAPB continues to progress to near completion with the 4 year action plan following the Care Act 2014 guidance. A new strategic plan for 2018-2020 is now in

draft form and will be discussed at the HSAPB executive board in February 2018. 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 begin 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 Q3. A new publication date is not available currently due to this development. No SI reports were escalated to the HSAPB for SAR consideration in Q3.

## **10. CT PREVENT SILVER GROUP AND CHANNEL PANELS**

**10.1** 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.

**10.2** 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 were delivered in Q3 to further improve understanding of extremism and delivering British values. One of these workshops was half funded by Hull CCG.

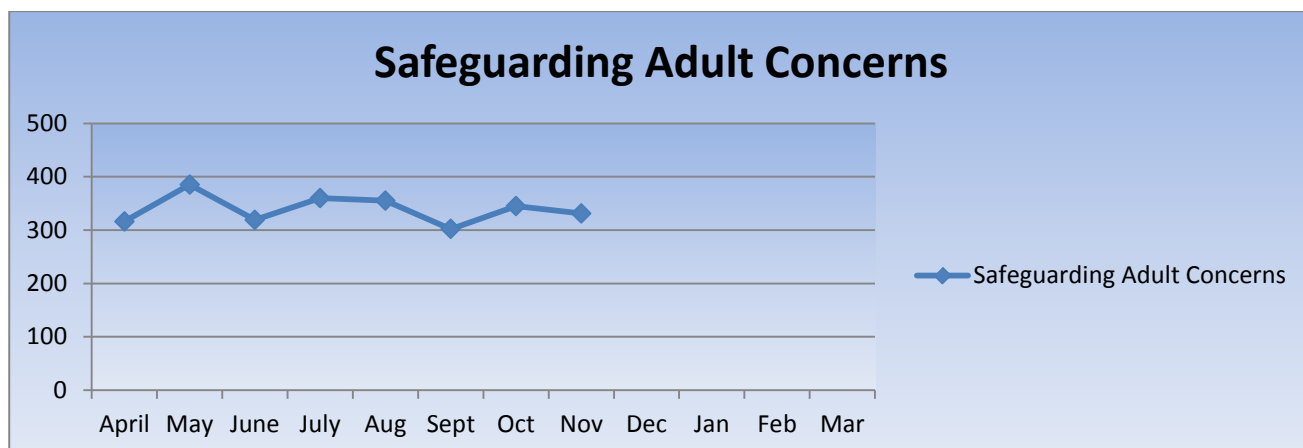
**10.3** Every CCG has received correspondence from NHS England notifying of increased focus on CT prevent following recent events in London and Manchester. This includes an expectation that all agencies are fully compliant with prevent duties by the end of Q4 2017/18. The Q&P committee received a full report and presentation in relation to current status of CT prevent in December 2017 which included statistics of local referrals into the Channel panel.

## **11. HULL SAFEGUARDING ADULTS MULTI AGENCY SAFEGUARDING HUB (MASH)**

**11.1** The table below demonstrates safeguarding adult concerns referred into the MASH so far in 2017/18. Another quarterly audit was completed by the SAFE group on a 10% random sample for concerns in Q3. The audit had a specific focus on making

safeguarding personal as per Care Act requirements. In Q1 Of 2018/19, a full report will be provided on all of the quarterly audits completed in 2017/18.

	April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
<b>2017/18</b>	316	385	319	360	355	302	345	331				

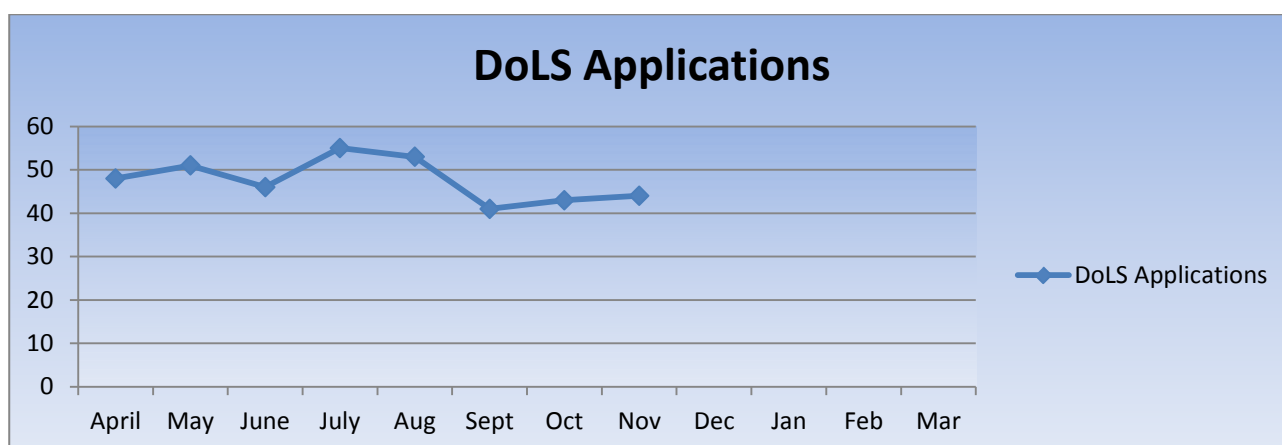


## 12. Deprivation of Liberty Safeguards (DoLS)

12.1 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 Hull MASH following a review during 2016/17.

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. In Q4 a review of all Hull CCG funded placements who require a deprivation will be reviewed for status and progress.

	April	May	Jun	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar
<b>2017/18</b>	48	51	46	55	53	41	43	44				



## 13. SAFEGUARDING AUDIT

13.1 An external audit of safeguarding in the Hull CCG was initiated in November 2017 and feedback will be provided to the Q&P committee/CCG Board when the audit is completed and the final report is received.

## **14. NHS ENGLAND**

**14.1** In Q3 the Hull CCG designated professional was approached by NHS England to sit on two national safeguarding groups. The first being the national adult safeguarding group and the second being the national modern slavery group. Both also held initial scoping meetings in Q3.

## **15. RECOMMENDATIONS**

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

### **ABBREVIATIONS**

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