



Item: 8.2

Repo	ort to:	NHS Hull Clinical Commissioning Group Board						
Date	of Meeting:	24th July 2020						
Title of Report:		NHS Hull CCG Safeguarding Annual Report						
Presented by:		Clare Linley – Director of Nursing and Quality						
Autho	or:	Dr Emma Stevens, Lorna Morris, Sarah Glossop, Dave Blain, Dr Jedah Zaro, Dr Sarah Coope.						
STATUS OF THE REPORT:								
	To appr	ove To endorse						
	To ratify	To discuss						
	To cons	For information ✓						
	To note							
PURF	POSE OF RE	PORT:						
a)	children ar	provide an overview of the arrangements in place to safeguard and protect dren and adults in Hull, in accordance with the NHSEI Safeguarding countability and Assurance Framework (SAAF) 2019.						
b)	statutory du	demonstrate how NHS Hull CCG, as a commissioner of services is fulfilling its atutory duties in relation to safeguarding in accordance with the Children Acts 289, 2004, Health and Social Care Act 2012, Care Act 2014 and Mental Capacity 2005.						
RECOMMENDATIONS:								
The NHS Hull CCG Board are asked to:								
a)	 a) Note the update provided regarding the CCG arrangements in place to safeguard and protect children, young people and adults in Hull. 							
b)	b) Be assured that NHS Hull CCG, as a commissioner of services is fulfilling its statutory duties in relation to safeguarding and Children Looked After in accordance with the Children Act 1989, 2004, Health and Social Care Act 2012, Care Act 2014 and Mental Capacity Act 2005.							

REPORT EXEMPT FROM PUBLIC DISCLOSURE

No

If yes, detail grounds for exemption

CCG STRATEGIC OBJECTIVE

Objective 1- In 2020 we will work together better to enable the people of Hull to improve their own health, resilience and wellbeing and to achieve their aspirations for the future.

Objective 3 – NHS Hull CCG will fulfil its statutory responsibilities in relation to children in accordance with the Children Acts 1989 and 2004.

Section 11 of the Children Act 2004 requires CCGs to work effectively with local authorities, the police and third sector organisations in the operation of the local Safeguarding Children Partnership. The Care Act 2014 places CCGs as a statutory partner with responsibilities for safeguarding adults in need of care and support via the local Safeguarding Adults Partnership Board.

Effective arrangements to safeguard and promote the welfare of children and adults are in place.

CCGs as commissioners of local health services need to assure themselves that the organisations from which they commission have effective arrangements in place.

IMPLICATIONS: (summary of key implications, including risks, associated with the paper),						
Finance	There are no financial risks associated with this report.					
HR	There are no HR implications.					
Quality	Risks not addressed may result in safeguarding concerns. 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 children and adults at risk of, or experiencing abuse and neglect.					

ENGAGEMENT:

Engagement takes place with commissioned provider organisations via the Hull and East Riding Health Liaison Group. Challenge and scrutiny of provider safeguarding compliance and performance takes place via the Clinical Quality Forums (CQF), Quality Delivery Groups (QDG), Contract Management Boards (CMB) and YAS Quality Board/Sub Regional Quality Groups.

Inter-agency engagement primarily takes place with health and other partner agencies via

the Hull Safeguarding Children Partnership (HSCP), Hull Safeguarding Adults Partnership Board (HSAPB) and associated sub-groups, Community Safety Partnership (CSP), Counter Terrorism (CT) Prevent groups, Hull & East Riding Safer Sleep Steering group and other multi agency processes referenced within the report.

Engagement with General Practitioners (GP) takes place through the Protected Time for Learning (PTL) events and GP safeguarding training programme.

The CCG Named GPs for safeguarding children and adults also provide further engagement, training and support for primary care staff.

LEGAL ISSUES: (Summarise key legal issues / legislation relevant to the report)

- Children Act 1989 and 2004
- Care Act 2015
- Children and Social Work Act 2017
- Children Act 1989 (Amendment) (Female Genital Mutilation) Act 2019
- Modern Slavery Act 2015
- Counter Terrorism and Security Act 2015 (CT Prevent)
- Police and Justice Act 2006 (CSP)
- Domestic Violence Crime and Victims Act 2004 (DHR)
- Criminal Justice Act 2003 (MAPPA)
- Mental Capacity Act 2005
- Mental Capacity (Amendment) Act 2019
- Mental Health Act 1983, 1997, 2007
- Domestic Violence Act 2018
- The Data Protection Act 2018
- Human Rights Act 1998

EQUALITY AND DIVERSITY ISSUES: (summary of impact, if any, of CCG's duty to promote equality and diversity based on Equality Impact Analysis (EIA). **All** reports relating to new services, changes to existing services or CCG strategies / policies **must** have a valid EIA and will not be received by the Committee if this is not appended to the report)

	Tick relevant box
An Equality Impact Analysis/Assessment is not required for this report.	✓
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: (How the report supports the NHS Constitution)

Safeguarding 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 interests of patients, local communities and the wider population.

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

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

CCG Strategic Objectives

Objective No	CCG Strategic Objective
1	Integrated and Joint Commissioning
2	Integrated Delivery
3	Delivery of Statutory Duties
4	Quality and Safety
5	To embed Patient and Public Involvement across the organisation and ensure that the CCG meets its statutory duty under 14Z2 of the Health and Social Care Act

NHS HULL CLINICAL COMMISSIONING GROUP

2019/20 SAFEGUARDING ANNUAL REPORT JULY 2020

1. INTRODUCTION

- 1.1 The purpose of this report is to ensure that NHS Hull CCG Board are informed of the local and wider safeguarding progress and developments in the year between April 2019 and March 2020, with particular reference to compliance with the NHS England/Improvement (NHSEI) Safeguarding Vulnerable People in the NHS Accountability and Assurance Framework (SAAF). The SAAF has been reviewed and updated since the last CCG annual safeguarding report in 2018/19.
- 1.2 The report reflects how NHS Hull CCG has fulfilled its statutory duties in collaboration with local multi-agency safeguarding partnerships to protect the welfare of children (including Children that are Looked After) (CLA) and adults at risk across the health economy in Hull.
- 1.3 The report also provides an update on involvement in regional and national contextual safeguarding fora and identified priorities for progressing safeguarding during 2020/21.

2. BACKGROUND

2.1 Safeguarding is firmly embedded within the wider duties of all organisations across the health system with a distinction between providers' responsibilities to provide safe and high quality care and support, and commissioners' responsibilities to assure themselves of the safety and effectiveness of the services they have commissioned. Fundamentally, it is the responsibility of every NHS funded organisation and each individual healthcare professional working in the NHS to ensure that the principles and duties of safeguarding adults and children are holistically, consistently and conscientiously applied, with the wellbeing of those adults and children at the heart of what we do. For adult safeguarding this also needs to respect the autonomy of adults and the need for empowerment of individual decision making, in keeping with the Mental Capacity Act, its Code of Practice and human rights articles.

3. INFORMATION

NHS Hull CCG Safeguarding Arrangements

NHS Hull CCG has fulfilled its statutory duties during 2019/20.

As a result of the publication of the revised and updated SAAF, the safeguarding team completed a self-assessment in Q3 which highlighted deficits with the hourly requirements for two of the designated safeguarding posts, and prompted further review of two areas of governance. Recruitment of a Designated Doctor for Children Looked After remained a challenge throughout the year, and this was placed on the CCG risk register in Q4. This was fully reported to the Quality and Performance Committee in December 2019.

Provider Assurances

Providers' compliance continued to be monitored and assured through;

- Contract Monitoring Boards.
- Quality Committees
- Regular meetings with providers' Named safeguarding professionals.
- The provider's completion of a quarterly safeguarding self-declaration.

In 2019/20 the designated professionals completed further consultation with the safeguarding leads within each of the commissioned provider organisations to revise update, and improve the quarterly safeguarding self-declarations. The self-declarations form part of the NHS Hull CCG safeguarding policy, and a full review and update of the rest of the policy will be completed in Q1 of 2020/21.

During 2019/20, the safeguarding team experienced some changes to its executive and designated leads. From July 2019 the Director of Nursing and Quality from North Lincolnshire CCG provided interim executive leadership for safeguarding to NHS Hull CCG. From 17th February 2020 and continuing to the end of Q1 2020/21 year, the Head of Safeguarding from North Lincolnshire CCG has also provided interim cover for the role of Designated Nurse for Safeguarding Children.

Named GP for Safeguarding Children

The Named GP for safeguarding children continued to fulfil the required position in accordance with role and activities stipulated within national guidance Working Together to Safeguarding Children 2018 and Safeguarding Children and Young People Inter Collegiate document 2019.

The Named GP has continued to provide ongoing safeguarding children case discussion, advice and support as required with clinicians and practice managers.

GPs and Practice managers were informed of the updated safeguarding training requirements (for all practice staff, based on the published Inter-collegiate documents for both adults and children).

Safeguarding Children training Level 3 sessions for local GPs took place on three occasions during 2019/20, which the Named GP contributed to. Work is currently underway to develop an alternative virtual training package for delivery of level 3 material to GP during COVID-19 pandemic during 2020/21.

The Named GP has continued to contribute to Learning Lessons Reviews and multiagency case audits completed by the HSCP. Topics covered include domestic abuse, neglect, missing children, trafficking and exploitation.

The Named GP also continued to support CHCP safeguarding admin team (who administer the process for child protection case conference reports from GPs to the safeguarding partnership). This has been strengthened through actions taken to ensure that the GP information is included for each child for whom a child protection conference is being held, which will improve communication back to the correct GP.

Partnership work was also completed with HUTHT and CHCP regarding the new FGM-IS process (which went live in HUTHT at the end of July 19). This included discussion with Royal College of GPs (RCGP) safeguarding lead for guidance and informing LMC of discussions and proposed process.

The guidance for Children WNB (Was Not Brought) to appointments was finalised for primary, secondary and tertiary care and was presented to Quality & Performance Committee in January 2020 and approved. This work has then been developed further by focusing on the issue around babies/children not being brought to immunisation appointments and meetings are underway with Public Health, Child Health, GPs and CHCP services to look at demographics and wider issues with the aim of collating information in order to develop agreed policies.

Named GP for Safeguarding Adults

Currently there are no national guidelines for the Named GP for safeguarding adult roles within CCGs, however, role and activity (sessions) within NHS Hull CCG for safeguarding adults is commensurate with the Named GP role for safeguarding children.

The Named GP continued to support the adult Multi Agency Safeguarding Hub (MASH) in Hull to address any safeguarding concerns involving primary care, ensuring expert advice was provided for any enquiries being completed.

Primary Care featured strongly in all of the Domestic Homicide Reviews (DHR) during 2019/20. The Named GP initiated and established a domestic abuse routine enquiry pilot with one of the practices involved, assisting with training the practice staff and developing governance arrangements to support the process. Further practices will be sought to participate and repeat the routine enquiry process in 2020/21 to improve identification and support for victims of domestic abuse within primary care.

The Named GP further supported the DHR process by completing chronologies for all reviews following liaison with practice staff and accessing clinical records; subsequently developing reports and recommendations where relevant in identified areas for improvement.

The Named GP has also developed, supported and delivered the first Level 3 safeguarding adult training to Hull GPs on two occasions during 2019/20. The sessions evaluated very positively with over 50 Hull GPs in attendance. Specific positive feedback was focussed on updates regarding mental capacity, safeguarding adult review process and changes with the proposed introduction of the Liberty Protection Safeguards (LPS) by attendees.

During the COVID 19 pandemic, the Named GP also circulated safeguarding alerts and updates for primary care via newsletters and the CCG portal. This included informing primary care with regards to Care Act 2014 easements, guidance on completion of distant mental capacity assessments, swabbing for patients who lack capacity and implementation of the Coronavirus Act 2020.

During March 2020 the COVID 19 Pandemic became established with widespread impact on safeguarding and how health and care services were delivered across the city.

The CCG safeguarding team continued to ensure that statutory duties were fulfilled. Careful scrutiny was applied when evidence demonstrated a fall of safeguarding referrals for adults and children, and an increase in referral rates of domestic abuse in the city being reported as the pandemic progressed. The CCG safeguarding team continued to work with many system partners to understand the local position and supported the implementation of domestic abuse awareness campaigns across the city, including the COVID 19 swabbing station at the Humber Bridge.

At the end of Q4 the Children's practice review hubs function was also suspended due to the pandemic and re-assignment affecting staff working within the arrangements. The CCG Designated Professional in the hub was tasked to support delivery of alternative safeguarding duties. These included developing the CCGs safeguarding annual report, establishing a new safeguarding forum within the CCG with associated terms of reference and in progressing the safeguarding service

specification with CHCP. The Designated Professional for Safeguarding Adults was also requested to support the frailty team within the Integrated Care Centre during March 2020 as part of the COVID 19 response.

Children Looked After Annual Report 2019/20

The responsibilities of CCGs regarding CLA are set out in Promoting the Health and Well-being of CLA (DfE 2015) and Working Together to Safeguard Children 2018. CCGs in collaboration with other NHS commissioners and local authority partners have a responsibility to ensure the timely and effective delivery of health services to CLA.

In fulfilling these responsibilities, CCGs in partnership with NHS E/I and the Local Authority:

- Have a duty to co-operate with requests from local authorities to undertake health assessments and help them ensure support and services to CLA are provided without undue delay.
- Commission health services for all children in their area.
- Have a duty to ensure that they comply with the NHSEI guidance on establishing the responsible commissioner in relation to secondary health care when making placement decisions for CLA and to resolve any funding issues that arise.
- Have a duty to ensure that plans are in place to enable children leaving care to continue to obtain the healthcare that they need.
- Have in place a contractual agreement to secure the expertise of designated doctors and nurses for CLA.
- Have a strategic lead for mental health and learning disabilities commissioning.

In addressing these responsibilities, NHS Hull CCG has in place a Designated Nurse for CLA, a Designated Doctor for CLA, a Strategic Lead for Children, Young People and Maternity, and a CCG commissioner lead for Special Educational Needs and Disability (SEND).

Delivery of statutory duties during 2019/20 further enabled;

Development and delivery of health training to foster carers, by NHS Hull CCG designated nurse and CHCP CLA health team.

Joint investment by NHS Hull CCG and Hull CC into the children's directorate also supported a new CLA therapeutic service within the city. In addition, HTFT supported the children on the "Edge of Care" and residential children's homes by providing therapeutic and nursing interventions. All CLA continued to have priority access to Child and Adolescent Mental Health Services (CAMHS) in Hull.

Funding was provided for the publication of a "Handy Health Guide" for care leavers, this was developed following engagement and consultation with care leavers.

Maintaining membership of the Corporate Parenting Board and Complex Needs Panel to provide health input to the processes.

The provision of community paediatric medical services continued via HUTHT and this included a Designated Doctor for CLA (this role was covered on an interim basis by the Designated Doctor Safeguarding Children). Initial health assessments and health care plans were completed for each child within 20 working days of coming into the care of Hull City Council, and contribution to the multi-agency CLA core group planning and review requirements. The role also continued to provide completion of adoption medicals and advice to adoption panels.

CLA community health services continued to be provided by CHCP which included the role of the Named Nurse. The assisted with the completion of health assessments, health care plans and contribution to the multi-agency care planning.

Undertaking of leaving care health assessment and provision of care leavers Passports also remained the responsibility of the Named Nurse. Acting as a key conduit and contact point for the child and their carer where they have difficulties accessing health services also allowed out of area placements to be monitored.

To support the CLA agenda, CHCP also provided the service to support the Adult Fostering and Adoption Medical Assessments and Screenings for prospective and active foster carers.

Child and Adolescent Mental Health Services (CAMHS) provision during 2019/20 was delivered by HTFT including the CLA attachment therapy service, access to psychological support to residential children's homes and to foster carers.

CLA Priorities for Development in 2020/21

CLA services were subjected to an Ofsted inspection during 2019/20. Implementation of the highlighted recommendations for the CCG arising from the self-assessment included to:

- Ensure permanent arrangements in place for the Designated Doctor for CLA
- Establish adult fostering medical and assessment requirements within Primary Care including appointment of the Medical Advisor Role for fostering and adoption panel requirements (as agreed by the Inspecting Local Authority Children Services (ILACS) monitoring visit in January 2020)
- Improve data collation, reporting and performance in relation to all CLA specific services with priority on those providing Independent Health Assessments (IHA) and Review Health Assessments (RHA) assessments
- Improvement in immunisation and dental data collation, reporting and performance.

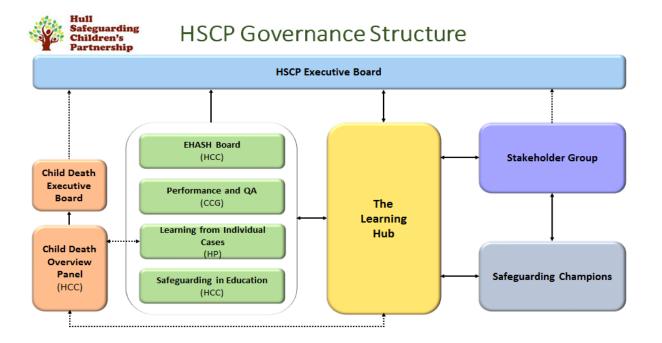
Completion and update reports will be reported to the NHS Hull CCG Quality and Performance Committee during 2020/21.

3.2 Partnership Working and Contextual Safeguarding

Hull Safeguarding Children's Partnership

The HSCP local safeguarding arrangements document was published in June 2019. These new arrangements are led by the HSCP Executive Board comprising three statutory partners, NHS Hull CCG, the Local Authority and Humberside Police. It is the Director of Nursing and Quality for NHS Hull CCG that is a member of this Board. As a group, members have met on a monthly basis to provide leadership and overview of the implementation plan with supporting groups reporting to the Board.

The governance structure of the new HSCP arrangement is included in the diagram below.



From January 2020, NHS Hull CCG placed a staff member (0.6WTE) into the Learning Hub as the Practice Review and Learning Lead to represent health within the operationalisation of the new partnership arrangements.

The Learning Hub has been working on three 'back to basics' priorities:

- 1. Threshold
- 2. Partnership
- 3. Management oversight.

This year, engagement from wider partners occurred through a stakeholder group and a champion's forum to support the new arrangements.

Key safeguarding leads from health partners have been actively involved in the stakeholders group, and they have identified staff members to become safeguarding champions across the city.

Stakeholder events were completed in June and December 2019, with the March 2020 event cancelled due to social distancing requirements of COVID-19, but a briefing was produced to update all stakeholders instead.

Three champions' forums were held in February 2020, where 52% of safeguarding champions based within a health setting attended, which was the strongest representation across the partnership. This was further strengthened by membership and attendance at the partnerships sub groups throughout the year.

Child Death Operational Procedures (CDR)

Working Together 2018 outlines the duties of Local Authorities and Clinical Commissioning Group as Child Death Review (CDR) partners in responding to, investigating, and reviewing the death of any child from any cause. Child Death Review Statutory and Operational Guidance (England) (October 2018) sets out best practice and statutory guidance for implementation of the more standardised requirements for the child death review process.

In June 2019 Hull Local Authority and NHS Hull CCG published their plans for meeting the new requirements and implementation of the guidance for Hull continues to progress within the CDR Operational Group. This group comprising of CDR partner organisations and oversight is achieved by an appointed CDR Executive Group equally made up of partner organisations.

Hull Safeguarding Adults Partnership Board (HSAPB)

During this reporting period, executive health leadership on the HSAPB has been provided by the Director of Nursing and Quality from NHS North Lincolnshire CCG, as per statutory duties. The NHS Hull CCG Designated Professional for Safeguarding Adults also fulfilled statutory duties as a member of HSAPB Safeguarding Adults Review (SAR) panel and Strategic Delivery Group (SDG).

During the year, the HSAPB completed a series of time out events for statutory partners to review functions and agree priorities for the executive board. Four priority areas were agreed;

- 1. Put in place a joined up approach to safeguarding for people of all ages, i.e. across the Adult Safeguarding Board, Children, Families and Young People's Safeguarding Board and the Community Safety Partnership.
- Put in place more effective governance structure for the Board that enables clearer assurance and accountability, and any potential synergies and economies of scale with other Boards.

- 3. Build a more proactive, evidence-based approach in how we use and develop our collective date and intelligence to inform our priorities for action.
- 4. Review our communication and engagement across the three statutory agencies (and with the voluntary and community sector) to make sure that it is two-way, supporting the work of the Board to raise the profile of safeguarding, and informing learning and practice in a timely way.

The HSAPB has published 2 Safeguarding Adult Reviews (SAR) within its duties under the Care Act 2014. The reviews highlighted the following themes;

- Self-Neglect
- Risk of Missing Persons (Herbert Protocol)
- Professional Judgements and Guidance
- HSAPB liaison with the Mental Health Crisis Concordat
- Mental Health Crisis
- Purchasing prescription drugs over internet/dark web

NHSEI Safeguarding Adults National Network (SANN)

The Designated Professional for Safeguarding Adults continued to be the representative for the North Region on the SANN, providing close involvement with national developments to disseminate with local and regional health safeguarding leads.

Community Safety Partnership (CSP)

Designated Safeguarding Professionals continued to attend and represent NHS Hull CCG at the CSP throughout the year, offering support and guidance from the health organisations in the city on key priorities affecting public safety and support for vulnerable victims of crime and abuse.

Across the year, NHS Hull CCG was involved in 5 Domestic Homicide Reviews (DHR) in total commissioned by the CSP as per statutory duties, 4 in Hull and 1 in Kent. These challenging and complex reviews involving domestic abuse, serious violence, stalking, murder, coercion and control, produced disparate lessons for the agencies involved. Themes for health agencies originating from the reviews included:

- Understanding cultural and religious beliefs of foreign nationals
- Domestic abuse training for primary care staff
- Domestic abuse risk assessments in health assessments
- Domestic abuse awareness and reporting in pharmacies

Multi Agency Public Protection Arrangements (MAPPA)

Close work with MAPPA processes is a statutory duty which has been fulfilled by the NHS Hull CCG safeguarding team during the year. This assisted with the provision of

health care and support to complex offenders in the criminal justice systems, whilst also ensuring that risks of abuse and violence towards NHS staff were reduced.

NHS Hull CCG were also involved and represented on the panel, in one local MAPPA Serious Case Review (SCR) that highlighted a positive and high level of service provided by commissioned health partners involved in the case.

Counter Terrorism (CT) Prevent

NHS Hull CCG continued to engage with local arrangements established to safeguard vulnerable individuals who may be radicalised towards extremism and terrorism. Support was provided to the multi-agency processes to ensure that navigation and identification of appropriate local health services were identified to safeguard and protect the individuals and fulfil this legislative duty under the Counter Terrorism and Security Act 2015.

Humber Modern Slavery Partnership

Identification and reporting of modern slavery victims continued to grow in Hull during 2019/20, matching regional and national profiles.

NHS Hull CCG remained a fully engaged member of the partnership during the year assisting with the delivery of key priorities and a full day learning event at the Wilberforce Institute in Hull.

The Designated Professional for Safeguarding Adults also remained a member of the national NHSEI modern slavery group to share and support the development of best practice.

NHS Hull CCG also reviewed and updated its own modern slavery statement during 2019/20 as per duties under Section 54 of the Modern Slavery Act 2015.

Humber, Coast and Vale (HCV) Integrated Care System (ICS) Safeguarding Group

A HCV Designated Safeguarding Group was established in 2019/20. Regular meetings were completed in the second half of the year, including attendance of NHSEI North regional safeguarding leads. Funding was secured from NHSEI to support two HCV area safeguarding conferences in 2020/21 although progress was delayed due to COVID 19 restrictions. Priorities were agreed and established to support further collaboration and joint work plan to progress in 2020/21.

Safeguarding Adults Conference

NHS Hull CCG jointly funded with East Riding of Yorkshire CCG, a successful safeguarding adults conference held at Hull University in March 2020. The conference was attended by over 100 delegates with presentations from local and national speakers covering many areas of adult safeguarding, with a specific focus on the Mental Capacity Act.

Safeguarding Risks

The safeguarding team registered three risks on the corporate risk register during 2019/20. The three risks related to:

- Implementation of the Liberty Protection Safeguards (LPS) as a new legislative duty for the CCG.
- Implementation of the new HSCP arrangements following changes to national guidance and legislation.
- Longevity of Designated Doctor cover arrangements for CLA due to long term absence.

NHS Hull CCG statutory and mandatory safeguarding training compliance in 2019/20

	Q1	Q2	Q3	Q4
	2019/20	2019/209	2019/20	2019/2020
SG Children	92%	95%	94%	99%
SG Adults	89%	94%	92%	96%
CT Prevent	89%	91%	89%	94%

4. Safeguarding Priorities for 2020/21

Key areas identified for development are:

- a) Continue to strengthen NHS Hull CCG safeguarding arrangements to ensure full compliance with the SAAF.
- b) Establish a CCG Safeguarding Assurance Group (SAG), with clear terms of reference which will report into Quality and Performance Committee via a chairs report on a quarterly basis.
- c) Continue to improve arrangements for gaining safeguarding assurance from all providers through implementation of the revised and updated safeguarding policy, including updated self-assessment tool.
- d) Continue to embed and strengthen NHS Hull CCG safeguarding system leadership and participation across the HSCP partnership.
- e) Develop and initiate further domestic abuse routine enquiry pilots with primary care practices/networks.
- f) Support further development of the HCV safeguarding partnership arrangements.

5. **RECOMMENDATIONS**

It is recommended:

a) That the members of the NHS Hull CCG Board note the update provided within this annual report.

b) That members of the NHS Hull CCG Board be assured that the Executive Lead for safeguarding and the Safeguarding Team are taking appropriate action to ensure the CCG meets its statutory requirements in relation to all areas of safeguarding.

Report written and developed by;

Dave Blain, Designated Professional for Safeguarding Adults Lorna Morris, Designated Nurse for Looked After Children Sarah Glossop, Designated Nurse NHS North Lincolnshire CCG Dr Emma Stevens, Designated Professional for Safeguarding Dr Jedah Zaro, Named GP for Safeguarding Adults Dr Sarah Coope, Named GP for Safeguarding Children

Friday 10th July 2020