

NHS BOLTON CLINICAL COMMISSIONING GROUP
Public Board Meeting

AGENDA ITEM NO:9.....

Date of Meeting:9th April 2021.....

TITLE OF REPORT:	Safeguarding Annual Report	
AUTHOR:	Kaleel Khan/Christine Dixon	
PRESENTED BY:	Kaleel Khan/Christine Dixon	
PURPOSE OF PAPER: (Linking to Strategic Objectives)	To present to the Board the Safeguarding Annual Report for 2019/20.	
LINKS TO CORPORATE OBJECTIVES (tick relevant boxes):	Deliver the outcomes in the Bolton Joint Health and Care Plan.	
	Joint collaborative working with Bolton FT and the Council.	
	Supporting people in their home and community.	
	Shared health care records across Bolton.	
	Regulatory Requirement	√
Standing Item		
RECOMMENDATION TO THE BOARD: (Please be clear if decision required, or for noting)	The Board is asked to note the content and progress and accept this report as assurance that the CCG is meeting the statutory requirements for safeguarding children and adults and continue to support the CCG Safeguarding Team to meet its responsibilities highlighted in this report.	
COMMITTEES/GROUPS PREVIOUSLY CONSULTED:	<ul style="list-style-type: none"> • CCG Safeguarding Team • CCG Quality and Safety Committee • CCG Executive Team • Michael Robinson Associate Director of Governance and Safety/ Executive Lead Safeguarding 	
REVIEW OF CONFLICTS OF INTEREST:	Conflicts of Interest were reviewed and there were none to declare.	
VIEW OF THE PATIENTS, CARERS OR THE PUBLIC, AND THE EXTENT OF THEIR INVOLVEMENT:	Patient views are not specifically sought as part of this report.	
EQUALITY IMPACT ASSESSMENT (EIA) COMPLETED & OUTCOME OF ASSESSMENT:	EIA and an assessment is not considered necessary for the report.	

NHS Bolton CCG Safeguarding Annual Report

1 Executive Summary

During 2019/2020 the CCG Safeguarding Team worked closely as a statutory partner to implement changes regarding the Bolton Safeguarding Children Partnership. Equally, we have been working to strengthen the health voice of the Safeguarding Adult Board supported by the Bolton Health Safeguarding Collaborative. Bolton CCG is positively influencing collaboration between the Safeguarding Children partnership, the Adult Board, and the Community Safety Partnership. All three Boards/Partnerships have key themes in common, such as tackling Domestic Violence, Criminal Exploitation, Prevent and providing a coordinated multi-agency response when people are in need of early intervention.

The CCG is judged on whether we improve outcomes for local people, we commission safe services and to ensure the NHS Constitution standards are met. To achieve the Safeguarding Team's objectives for 2019/2020 we were able to demonstrate:

- We influenced the commissioning, contractual and procurement process in relation to provider's safeguarding arrangements;
- Held providers and senior leaders to account where there have been risks identified across the system through the Accountability and Assurance Framework;
- Developing good working relationships with health services and partners to create a culture of openness and transparency.
- Developed a number of pieces of work for example an asylum seeker project, strengthening information sharing and new MARAC processes within GP practices

2 Introduction and Background

The CCG commissions (or buys) health services from organisations that provide health services. In Bolton most healthcare is provided by General Practitioners (GP's) and NHS trusts, but other organisations from the voluntary and private sectors also have contracts to provide some services.

The CCG works closely with all providers to monitor standards, performance, and to make improvements to services to meet the needs of local people. Any areas of failing or poor performance are raised with the relevant provider and an action plan is put in place, setting out how problems will be resolved.

CCGs are one of the statutory safeguarding partners and the major commissioners of local health services. They are responsible for the provision of effective clinical, professional and strategic leadership to child safeguarding, including the quality assurance of safeguarding through their contractual arrangements with all provider organisations and agencies, including from independent providers.

Section 11 of the Children Act 2004 places duties on a range of organisations, agencies and individuals to ensure their functions, and any services that they contract out to others, are discharged having regard to the need to safeguard and promote the welfare of children.

NHS organisations and agencies and the independent sector, including NHS England and Clinical Commissioning Groups, NHS Trusts, NHS Foundation Trusts and General Practitioners have a duty to fulfil section 11 requirements.

3 Recommendations

NHS Bolton CCG Governing Body Board is asked to note the content of this report and accept this report as assurance that we are meeting the statutory requirements for safeguarding children and adults and they continue to support the CCG Safeguarding Team to meet its responsibilities highlighted in this report.

Kaleel Khan
Head of Safeguarding Adults

Chris Dixon
Head of Safeguarding Children (Including Designated Nurse for Safeguarding Children and Looked After Children)

February 2021

Key areas of work during 2019-20

Safeguarding
Training

Safeguarding
Children
Partnership
Development

Information
Sharing and DPIA
Development

Prevent/Channel

Assurance of
Providers

Domestic Abuse &
Violence In Primary
Care

Interagency
Working Including
Multiagency Audits

Safeguarding
Reviews

Complex Case
Advice

Mental Capacity
Act and DoLs

Leading Strategic
Projects in Greater
Manchester

Asylum Seeker
Project

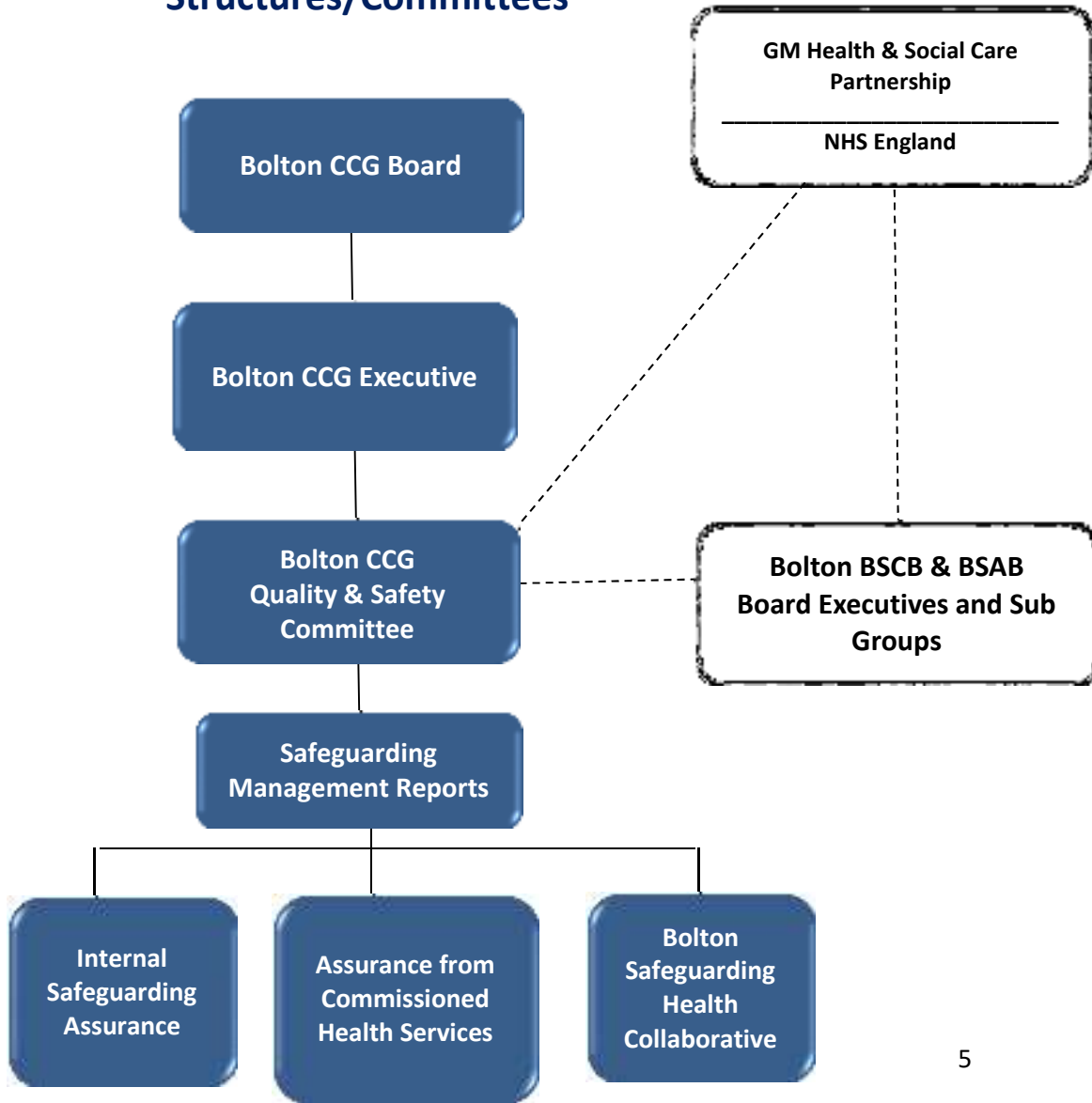
Overview of NHS Bolton CCG Compliance

As per the “Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework” (NHS England 2018) the CCG has a range of statutory duties around safeguarding adults and children. The Safeguarding Team provides a quarterly report to the CCG Quality and Safety Committee and to NHS England which details our compliance and current strengths and concerns in relation to safeguarding across Bolton. An overview of compliance is detailed below and will be explained further in this report.

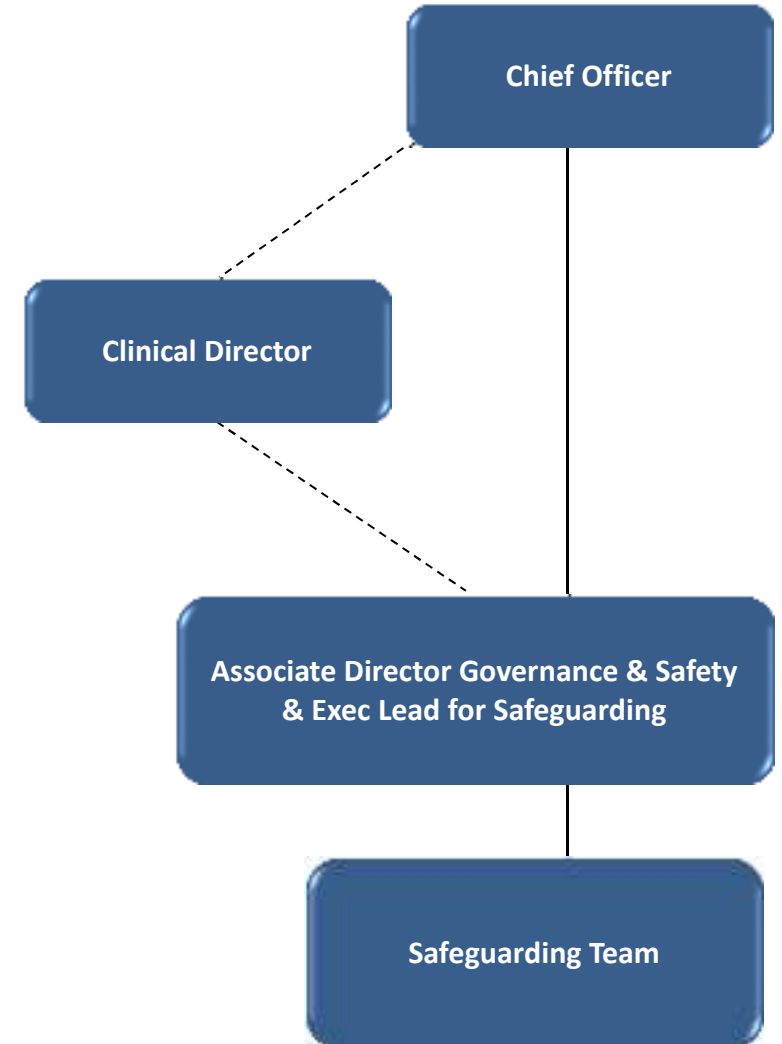
A clear line of accountability for safeguarding, properly reflected in the CCG governance arrangements, i.e. a named executive lead to take overall leadership responsibility for the organisation’s safeguarding arrangements	
Clear policies setting out their commitment, and approach, to safeguarding, including safe recruitment practices and arrangements for dealing with allegations against people who work with children and adults, as appropriate	
Training their staff in recognising and reporting safeguarding issues, appropriate supervision, and ensuring that their staff are competent to carry out their responsibilities for safeguarding	
Equal system leadership between LA children’s services, the police and the CCG is now required under the Working Together to Safeguard Children Statutory Guidance 2018	
Effective inter-agency working with LAs, the Police and third sector organisations, including appropriate arrangements to co-operate with LAs in the operation of safeguarding children’s partnerships, Corporate Parenting Boards, SABs and Health and Wellbeing Boards.	
Ensuring effective arrangements for information sharing	
Employing the expertise of a designated paediatrician for Sudden Unexpected Deaths in Childhood (SUDIC)	
Employing the expertise of designated professionals for safeguarding children, children in care and safeguarding adults	
Effective systems for responding to abuse and neglect of adults.	
Supporting the development of a positive learning culture across partnerships for safeguarding adults, to ensure that organisations are not unduly risk averse.	
Working with the Local Authority to ensure access to community resources that can reduce social and physical isolation for adults.	
CCGs need to demonstrate that their designated professionals are involved in the safeguarding decision-making of the organisation, with the authority to work within local health economies to influence local thinking and practice.	
As a commissioner of local health services to be assured that there are effective safeguarding arrangements in place in the services and gain assurance throughout the year to ensure continuous improvement	

NHS Bolton CCG Safeguarding Lines of Accountability and Reporting

Structures/Committees



Individual Accountability



Information Sharing

Good information sharing is paramount in safeguarding. The Safeguarding Team have developed Data Protection Information Agreements (DPIA) with GP practices around sharing of information for statutory reviews and MARAC.

The Team has also facilitated the development of a DPIA between 0-19 Health Services and GP Practices.

During the annual GP Safeguarding Event in February 2020 the CCG Data Protection Lead presented around the legal basis for information sharing with a particular focus on safeguarding.

Emotional Health and Wellbeing of Children and Young People

The Bolton Safeguarding Children Partnership has identified this as an area for assurance following a thematic review into child suicides 2016-2017.

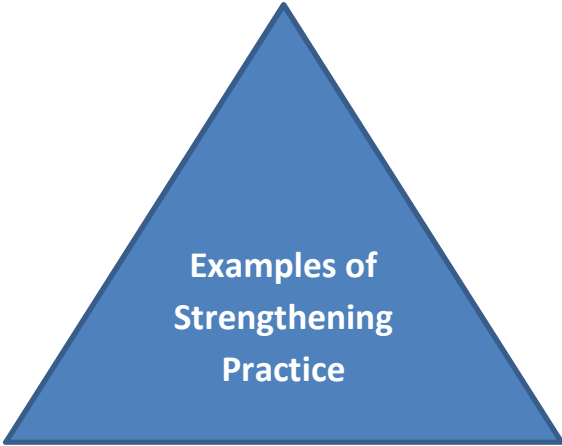
Bolton CCG Commissioning Team have been pivotal in driving a number of changes such as the Thrive Model and Thrive Partnership to increase access for children; the development of a suicidal ideation pathway and the development of the [bekindtomymind](#) webpage in conjunction with young people.

Prevent / Channel

NHS Bolton CCG safeguarding team is a statutory partner to the local channel panel which meetings monthly to review channel cases. This is led by the Local Authority Community Safety Partnership. The CCG provide health expertise and support Primary Care GP services.

The CCG is a member of the Bolton Prevent Steering Group which meets quarterly providing strategic oversight across Bolton.

The CCG offer Prevent training which is specifically tailored to Bolton GP practices.



Examples of Strengthening Practice

Mental Capacity Processes

The CCG reviewed and updated the Mental Capacity Act policy and processes. Practice is regularly reviewed and audited across Bolton GP Practices and Nursing homes. Training is regularly offered during and good practice is shared. The CCG safeguarding team continue to offer advice and support.

Asylum Seekers Project

The CCG safeguarding team submitted an application for funding to NHS England to run an Asylum seeker Project across Bolton GP Practices which was successfully awarded.

The main benefit of the project was to:

- Raise awareness of this population
- Raise awareness how safeguarding indicators are different for this community
- Increase efficiency around referral pathways into safeguarding
- Promote the health offer
- Reduce risks of harm or exploitation by better understanding the culture and needs of this community

Safeguarding Assurance of Providers

The CCG safeguarding team have a current working programme of audits annually to seek assurance from healthcare providers where the CCG have commissioned services in response to Safeguarding Contractual Standards.

This work is formally issued under Safeguarding Contractual Standards in line with the NHS Assurance and Accountability Framework via local CCG's where they commission healthcare services. The role of the CCG's safeguarding team is then to seek assurance from providers around their safeguarding internal arrangements where the CCG have commissioned healthcare services; this is for providers who are 'in area' and 'out of area'.

The Safeguarding Contractual Standards are generally made up of a variety of legal and policy directives which are underpinned by additional standards such as safeguarding training and/or specific standards where a system risk/failure has been identified by system leaders through shared learning across both the national or GM health system. This is an annual rolling programme. The table below demonstrates the current number of providers the CCG safeguarding seek assurance from.

Table 1: The CCG safeguarding team currently seek assurance from the following providers on an annual / bi annual basis

Provider type	Number of providers	Total
NHS main Providers (on-going annual audit and visit)	4	
Primary Care GP Services (bi-annual audit and visit)	48	
Nursing homes (bi-annual audit and visit)	11	
Charities where grants are provided with the NHS pound (bi-annual audit)	18	
Domiciliary care (bi-annual audit)	20	
Independent large/small Bolton CCG lead (will be audit and some visits)	10	
PHB Brokers (will be bi-annual audit)	5	
Out of area providers, other CCG's lead (we contact relevant CCG's to request assurance - ongoing)	26	
FCT/CHC providers (Out of area) (we contact relevant CCG's to request assurance - ongoing)	32	
Children's Homes (CQC registered) (annual audit and visit)	2	

CCG GP Safeguarding Adult Event Date: 23rd October 2019

Topics covered were Asylum Seekers, Covert Medication, SARs & DHRs, Herbert Protocol and GM Channel Coordinator role.

The number of people who attended the event was 57.

Mental Health Practitioners in Primary care

The team identified that Mental Health Practitioners working within GP Practices but are employed by GMMH, had gaps in their knowledge of safeguarding issues and processes across the system. A full day training package was developed and delivered by members of the CCG Safeguarding Team. The topics included; PREVENT & Channel Panel, Looked After Children & Care Leavers, Safeguarding Supervision, Safeguarding Adults, Domestic Abuse and Violence & IRIS, Mental Capacity Act and Midwifery liaison. The day was evaluated most positively by all who attended.

The number of Mental Health Practitioners who attended was 9.

Working with children who are looked after

Working with resistant families and neglect

Adult Case Law

MCA and DoLS



Supervision

The Safeguarding Team has developed a one day supervision skills training course in order to address a gap identified in primary care and within the funded care team in the CCG. The first session was delivered in January 2020 to nurses, paediatricians and GPs and evaluated well despite the inclusion of skills practice!

CCG Event Standard 8 Patient Safety (Safeguarding) Date: 26th February 2020

Topics covered; Updates on changes in Safeguarding, Voice of the child, information sharing, 0-19 service, learning from reviews, Child Death Review sudden child deaths and Modern Slavery.

The number of people attended was 103.

CCG Safeguarding Training Compliance (Feb 2020)

Safeguarding Children Level 1: 90%
Safeguarding Adults Level 1: 87%
PREVENT: 83.5%

Safeguarding Awareness Month

We made February 2020 our safeguarding awareness month at the CCG.

Our aim was to raise the profile of the safeguarding team within the CCG, to raise the profile of safeguarding adults and children and deliver the message that 'safeguarding is everyone's responsibility' and to improve training compliance for all CCG staff in respect of safeguarding. Our topics included PREVENT, Domestic Abuse & Violence and Safeguarding training.

Impact of Safeguarding Training

The role play part of 'how not to supervise' puts into context how quickly supervision can end when carried out incorrectly – Supervision Training Feedback 30.01.20

An understanding of how supervision is carried out in the context of safeguarding to improve patient care and well-being of staff – GP who attended the Supervision Training on 30.01.20

Informative and Enjoyable – Attendee at CCG Event Standard 8 Patient Safety (Safeguarding) 26.02.20

Good for networking – Attendee at CCG Event Standard 8 Patient Safety (Safeguarding) 26.02.20

The pitch and delivery of the topics -- Attendee at CCG Event Standard 8 Patient Safety (Safeguarding) 26.02.20

Speaker interaction during the break- Attendee at the CCG Safeguarding Adult Event 23.10.219

Gives staff more confidence to complete the paperwork- Attendee at the MCA Training 12.04.2019

Felt confident to approach the presenter and ask questions during the training- Attendee at the MCA Training 29.04.2019

Sharing ideas and experiences with the group – Attendee at the Childhood Neglect & Resistant Families 30.05.2019

Free discussion and interactive- Attendee at the LAC Level 3 Training 28.10.2019

Opportunity to have case study discussions as well as share practitioner experiences- Attendee at the LAC Level 3 Training 28.10.2019

Domestic Abuse and Violence (DAV) development in Primary care

We have been working across primary care to enhance information sharing and maintain the safety of individuals. Data Protect Impact Assessments (DPIA) has been developed to assist GPs to share information within the MARAC process and other health professionals within the safeguarding arena. These comply with the seven key principles of General Data Protection Regulation (GDPR). During quality assurance visits, GP practices have been supported to enable them to read code vulnerable patient's records, link family members and audit records regularly to ensure records are coded appropriately, maintaining the safety of their patients. GP practices continue to receive training from the IRIS project and the team encourage this and share any feedback during the quality assurance visits.

The team have updated the Domestic Abuse and Violence policy for all staff, to include Adolescent to Parent Violence and Abuse and Stalking and Harassment.

We continue to be active members of the multi-agency MARAC Steering Group.

The Herbert Protocol launched within Primary Care

In partnership with GMP we launched the Herbert Protocol (Adults with Dementia at risk of going missing) within Primary Care; this was done via our newsletter and at the Practice Managers meeting in July 2019. It involved joint working with members of the CCG Primary Care Team to help embed the protocol into practice and within the GP IT systems.

Primary Care Safeguarding Newsletter

As a team we sent out 3 quarterly safeguarding newsletters to Primary Care during 2019-2020. The purpose of the newsletter is to share up-to-date safeguarding information and to act as a support mechanism for our Primary Care colleagues. We plan to further develop this in 2020-2021 to also include a quarterly briefing following the newsletter whereby we can provide more in depth learning and support and also our Primary Care colleagues can discuss any concerns with the team. Some of the topics covered in the newsletters have included:

- Safeguarding Assurance Audit
- Asylum Seekers & Refugees
- 'Think Family' and trauma informed care
- Channel - safeguarding people from being drawn into Terrorism
- Safeguarding Children, Young People and Adults at Risk in the NHS
- Bolton Safeguarding Children Partnership Multi-Agency SG Arrangements
- Child Protection Audit Report
- Changes to guidance
- Honour Based and Forced Marriage Pilot Project by Project Choice
- Outcomes from Section 42 Safeguarding Enquiry
- Men's Mental Health
- The launch of the Covert Medication Process
- Multi-Agency Risk Assessment Information Sharing (MARAC)
- The launch of the 0-19 GP-SCPHN Liaison details
- Liberty Protection Safeguarding's (LPS)
- Prescription Poverty

Local Safeguarding Partnerships



The Safeguarding Adult Board is underpinned by the Care Act 2014 and is made up of three key statutory partners being the CCG, Police and Local Authority. During this period the independent chair stepped down from his role and the the board is currently going reviewing its arrangements.

The safeguarding executive team meets regularly to seek assurance from partners around their safeguarding arrangements.

A board development day was arrangement and an independent consultant engaged with partners to understand its current arrangements and where the board wanted to be in the near future. A report was produced with recommendations and findings will be implemented in 20-21.

Following the publication of the Children and Social Work Act 2017 the Bolton Safeguarding Children Board has been replaced with the Bolton Safeguarding Children Partnership (BSCP) in June 2019. The accountability for the arrangements is shared equally by three partners; Local Authority, Police and CCG and there has been extensive joint working to develop these new arrangements. The three partners are required to work together with relevant agencies for the purpose of safeguarding and promoting the welfare of children in the area. These changes give us a real opportunity to work differently across Bolton.

The priorities for the new BSCP are neglect, domestic abuse and violence, child exploitation and thresholds and safeguarding.

Be Safe in Bolton is a Community Safety Partnership (CSPs) of responsible authorities (e.g. Police, Health, Local Authority, Fire & Rescue, Probation) working together to protect our local communities from crime and to help people feel safer. They work out how to deal with local issues including antisocial behaviour, drug or alcohol misuse, domestic violence and re-offending. They annually assess local crime priorities and consult partners and the local community about how to deal with them. CSPs were set up under Sections 5-7 of the Crime & Disorder Act 1998. The Community Safety Partnership submits their annual community safety plan to the local police and crime commissioners

Reviews

Child Safeguarding Reviews

During 2019-2020 the process for reviews where a child has been seriously harmed or died as a result of abuse or neglect has changed in response to Working Together 2018. The three safeguarding partners are now required to identify serious child safeguarding cases and then a rapid review must be conducted within 15 working days. This review must identify any immediate learning and decide the next steps including whether to commission and undertake a child safeguarding practice review. The findings must be submitted to a National Panel who will review the case and decide if a national review is required

In 2019-2020 Bolton has undertaken 3 rapid reviews and one of these requires a further review. Bolton and also published 2 serious case reviews which commenced in 2017 and 2018 for Child C and Family E

<https://www.boltonsafeguardingchildren.org.uk/downloads/file/155/baby-c-scr-report-publication-august-2019>

<https://www.boltonsafeguardingchildren.org.uk/downloads/file/168/family-e-scr-report-publication-october-2019>

Themes

- Professional challenge and escalation
- Timely and appropriate emotional health and wellbeing/ mental health support
- Impact of trauma and adverse childhood experiences
- Helping earlier
- A child is up to 18
- Information sharing and good quality referrals

Child Death Reviews

Statutory requirements place the responsibility for the reviews of child deaths on the Clinical Commissioning Group (CCG) and Local Authority from where the child was resident.

In June 2019 the Bolton, Wigan and Salford Tripartite Child Death overview panel published revised arrangements for the review of child deaths. These ensure a structured and consistent approach to review all deaths of children under 18 years of age in line with Working Together, 2018.

There are new statutory requirements for CCGs to commission and employ a Designated Doctor for Child Deaths. This post will support the delivery of the statutory duties with regards to Child Death Reviews and the Child Death Overview Panel outlined within the Child Death Review and Statutory Operational Guidance (Oct 2018) and Working Together to Safeguard Children (2018). The CCG approved the funding for this post in February 2019 which will be hosted by NHS Bolton Foundation Trust and this is pending recruitment at the end of this reporting period.

Adult Reviews

During 2019-2020 there were five reviews which are outlined below.

SAR 1	Bolton Safeguarding Board felt it was appropriate to adopt the Welsh model (practitioner event) to see if agencies can learn lessons. Report will be finalised in 2021.
SAR 2	Statutory process triggered and report will be finalised in 2021.
Joint SAR & DHR 1	Bolton Safeguarding Board and the Community Safeguarding Board met to review the case. Recommendations on this case will be made during 20-21.
DHR 2	Bolton Community Safety partnership have met during this period and a final report with recommendations will be made during 20-21
DHR 3	Bolton Community Safety partnership have met during this period and a final report with recommendations will be made during 20-21

Future plans

To roll out ICON scheme in relation to crying babies

To lead the BSCP neglect workstream

To ensure the employment of a Designated Dr for Child Deaths

To provide system leadership during COVID pandemic

To prepare for Liberty Protection Safeguards

To identify new innovations and implement safeguarding projects