

**REPORT TO MERTON CLINICAL COMMISSIONING GROUP
GOVERNING BODY**

Date of Meeting: 24th March 2016

Agenda No: 7.3

Attachment: 08

<p>Title of Document: MCCG Safeguarding Adults Quarter 3 report (1 October to 31 December 2015)</p>	<p>Purpose of Report: To Approve</p>
<p>Report Author: David Parry, Head of Quality/ Designated Safeguarding Adults Manager</p>	<p>Lead Director: Lynn Street, Director of Quality and Performance</p>
<p>Contact details: david.parry@mertonccg.nhs.uk</p>	
<p>Executive Summary:</p> <p>This Quarter 3 (Q3) report sets out Merton Clinical Commissioning Group safeguarding arrangements and activity within commissioning and provider services across the whole health economy of Merton for Q3.</p> <p>It provides the Governing Body with assurance that MCCG is meeting its statutory duties and requirements for safeguarding adults at risk by operating within the parameters of the Care Act 2014 and the Pan London Policy and Practice guidance 2015.</p> <p>The report focusses on progress made in priority areas identified within the Safeguarding Adults Annual Report:</p> <ul style="list-style-type: none"> • Assurance • Training • Prevent • Mental Capacity Act and Deprivation of Liberty Safeguards 	
<p>Key sections for particular note (paragraph/page), areas of concern etc: Section 5: Training rate for Merton CCG Safeguarding Adults in quarter 3 was 87% Section 10: Recommendations</p>	
<p>Recommendation(s): The Governing Body is asked to Approve the Q3 report</p>	
<p>Committees which have previously discussed/agreed the report: Merton Safeguarding Executive Group 01/02/16 Merton Clinical Quality Committee 12/02/16</p>	
<p>Financial Implications: N/A</p>	

Implications for CCG Governing Body: N/A
How has the Patient voice been considered in development of this paper: N/A
Other Implications: (including patient and public involvement/Legal/Governance/Risk/Diversity/ Staffing) Relates to Risk Register Number 791: If the CCG fails to establish appropriate systems and processes for safeguarding adults, vulnerable adults may be at risk of harm 3 x 2 = 6
Equality Assessment: N/A
Information Privacy Issues: N/A
Communication Plan: (including any implications under the Freedom of Information Act or NHS Constitution) This document will be available on MCCG website as part of Governing Body papers.

**Merton Clinical Commission Group
Safeguarding Adults at Risk
Quarter 3 Report
1 October 2015 – 31 December 2015**

DRAFT

Author:

David Parry - Head of Quality/DASM Merton CCG December 2015

Safeguarding Adults Report October to December 2015
David Parry Head of Quality/DASM
December 2015

1. Introduction

The purpose of this quarterly report is to build on the Quarter 1 and 2 report and inform Merton Clinical Commissioning Group's (MCCG) Clinical Quality Committee (MCQC), of the adult safeguarding arrangements and activity within commissioning and provider health services across the whole health economy of Merton. This report covers the period 1st October 2015 – 31st December 2015, (Quarter 3). It will provide a level of assurance to MCQC that Merton CCG is ensuring that its statutory duties and requirements for safeguarding adults at risk are being met and operating within the parameters of the Care Act 2014.

On 1st October, Merton CCG's substantive Designated Safeguarding Adult Manager (DASM) came into post. Whilst the Department of Health has recently made it clear that statutory bodies such as CCGs are no longer required to have a DASM, as it duplicates roles already carried out by local authorities, MCCG's has maintained the DASM role, with the DASM responsible for:

- The management and oversight of individual safeguarding and complex cases
- The coordination of incidents where there is an allegation made against a member of staff/ volunteer or student
- Liaising with counterparts in partner agencies such as Safeguarding Adult Board (SAB) members
- Highlighting how the organisation can prevent abuse and neglect from taking place
 - Ensuring that staff receive safeguarding training relative to their role, advice and guidance on safeguarding adult concerns, the Mental Capacity Act 2005 and Prevent issues.
 - Liaison with other statutory and voluntary agencies
 - Monitoring the progress of cases and to ensure they are dealt with in a timely fashion
 - Ensuring that referrals to the DBS and other governing bodies such as CQC/ GMC/ NMC/ HCPC are made
 - Ensure systems are in place to support patients, family members and staff regarding safeguarding adult investigations.

1.2 Merton CCG's DASM has built up an excellent working relationship with the Merton Local Authority (LA) safeguarding and commissioning teams. The LA retains the lead role in co-ordinating work to safeguard adults in the borough with responsibility for maintaining the local Safeguarding Adults Partnership Board. Each local partnership board has been asked to adopt the revised London Multi-Agency Safeguarding Policy and Procedures (released on 3rd December 2015 by London Councils), by April 2016, following its official launch in the next quarter, on 9th February 2016. This will be discussed as an agenda item at the next Merton SAB meeting on 9th March 2016.

1.3 MCCG's DASM has supported the LA with two Section 42 of the Care Act enquiries this quarter in relation to cases where the CCG funds a client and decisions are

needed as to whether any action should be taken where there is reasonable cause to suspect an adult is at risk because they:

- Need care and support
- Are experiencing, or are at risk of, abuse or neglect
- Are unable to protect him/herself against the abuse or neglect or the risk of it as a result of their needs.

1.4 Sections 43-45 of the Act relate to the role and responsibilities of Safeguarding Adults Boards from April 2015 to include:

- Duty to establish a Safeguarding Adults Board (SAB) to include the local authority, CCG and police. Merton SAB is well established but has not met this quarter, the December meeting being cancelled by the LA.
- Undertake a Safeguarding Adults Review (SAR) where a person has died through abuse or neglect, or a person has experienced serious abuse or neglect. There has been no SAR's commenced this quarter.
- Duty to publish an annual strategic plan. In doing so must:
 - Consult Healthwatch
 - Involve the community
- Duty to publish an annual report for the period 1st April 2015 to 31st March 2016.

1.5 Merton Clinical Commissioning Group discharges its responsibility to ensure adults at risk are safeguarded by:

- Use of safeguarding principles to shape strategic and operational safeguarding arrangements
- Setting safeguarding adults as a strategic objective in commissioning health care
- Using integrated governance systems and processes for assurance to act on safeguarding concerns in services
- Working with the local Safeguarding Adults Board, patients and community partners to create robust safeguards for patients
- Providing leadership to safeguard adults across the health economy
- Ensuring accountability and use learning within the service and the partnership to bring about improvements.

1.6 This report will focus on the progress made within the following priority areas identified within the current Safeguarding Adults Annual Report:

- Assurance
- Training
- Prevent
- Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLs)

2. Safeguarding Activity Data

2.1 Table 1 below details Safeguarding Activity compiled by London Borough of Merton. The data is taken from the Safeguarding Adults Performance Report which is part of the Adult Social Care Performance Framework and is based on safeguarding standards and performance (LGA & ADASS April 2012). The information was supplied by Shamal Vincent, Acting Performance Manager, at London Borough of Merton.

2.2 Table 1 Merton Safeguarding Adults Activity*

Performance & Outcomes Measure	Q1	Q2	Q3
	Jun	Sep	Dec
Number of safeguarding referrals. <i>(During the year)</i>	177	344	494
Number of safeguarding cases closed as an alert only. <i>(During the year)</i>	120	144	175
Number of cases closed as an investigation. <i>(During the year)</i>	18	35	65
Number of safeguarding cases open.	53	25	26

2.3 The above data includes all of the referrals received by Merton LA for the period 1st April 2015 to 31st December 2015. Unfortunately Merton LA was not able to supply a breakdown of Merton CCG funded clients.

3. Deprivation of Liberty Safeguards (DoLS)

3.1 Referrals received by month

Due to staff sickness at the LA, they were not able to supply DoLS statistics for this Quarter 3 report. Quarter 3 statistics will be added to the Quarter 4 report.

October	November	December
Not available	Not available	Not available

4. Safeguarding Activity this quarter within Merton CCG

4.1 The substantive Safeguarding Adults Lead (DASM) has been appointed and took up post in October 2015. In October the DASM attended a MCA/DoLS Network meeting at London Councils. This has proved a useful networking and learning forum with future meetings planned.

4.2 Woodlands Care home (mentioned in quarter 1 & 2 report), Intermediate care services have generated a lot of activity this quarter. The embargo was lifted and an action plan put in place to monitor quality and reduce the risk to patients. Concerns

continue to be raised with this home and excellent joint working with CCC Older Persons' Commissioner, DASM, SMCS and Local Authority partners is on-going. A further safeguarding strategy meeting was convened in December following a safeguarding enquiry concerning a medicine error that was investigated at a multi-agency strategy meeting. A follow up action plan is now in place to reduce the risk of recurrence.

- 4.3 A safeguarding enquiry was raised by a relative of a gentleman resident at Queens Court Care home in Wimbledon. Merton CCG's DASM has liaised with and supported the family regarding the allegations raised regarding the quality of care he received. The DASM has coordinated the investigation and collated the reports to prepare for the strategy meeting planned for January 2016.
- 4.4 Service level concerns have been raised concerning the quality of care within residential services at Kew House Care home in Wimbledon. This will be followed up in January 2016, by the LA safeguarding team working with the health economy including Merton CCG
- 4.5 The DASM became a member of the 111 OOH procurement and evaluation panel in October, reviewing two potential provider's policies along with their bids relating to Integrated service delivery and Clinical Governance and Quality.
- 4.6 The DASM and the Director of Quality attended NHS England's 3rd Annual Safeguarding Adults and Children Conference in October, opened by the Chief Nursing Officer, Jane Cummings. This proved an to be an excellent forum to liaise with NHSE Safeguarding Leads, other CCG Leads as well as Provider Trust's and Designated Professionals.
- 4.7 On 5th November, Merton CCG attended an NHSE led safeguarding adults and children deep dive meeting at NHSE. This gave the DASM a platform to learn more about how the CCG has been delivering its statutory safeguarding children and adult responsibilities. It was very well received, we await written feedback.
- 4.8 Merton's multi-agency Compact Board made up of Merton CCG Commissioner, DASM, LA and the local CQC Lead Inspector met to discuss provider concerns and share soft intelligence. This meeting relates to health and social care and is on-going will the focus on safeguarding, quality, performance concerns and trends.

5. Training

- 5.1 Merton CCG staff are required to undertake Safeguarding Adults at Risk training on a three yearly basis. Staff training for all CCG staff at level 1 is being provided by LB Merton and was delivered in October 2015. Training rate for Quarter 3 is 87% of permanent employees.
- 5.2 Mental Capacity Act training for the Merton Health economy will be planned in Quarter 4.

- 5.2 Prevent basic awareness training took place at the staff meeting on 11th November 2015 with links given to access information about DoH on-line Prevent awareness training and the Counter-Terrorism and Security Act 2015 related to health services.

6. Safeguarding in Commissioned services

- 6.1 On 1st October, MCCG became the lead commissioner for South West London and St George's MH Trust. Merton CCG attends the Clinical Quality Review Groups of its five key provider services. Although many performance and quality issues addressed in the CQRG may indicate adult safeguarding concerns the following assurance is sought on Safeguarding Adults at risk, either from the performance target or evidence that risk mitigation plans are in place when the target is not achieved:

- Compliance with Safeguarding Adults training at 80% which is the NHS London determined standard
- A designated Adult Safeguarding Manager is in post
- There is a narrative around staffing numbers that clarifies whether staffing is considered safe
- Identification of serious incidents and never events that may reflect safeguarding issues.
- Quarterly and annual reports on safeguarding

7. Merton Safeguarding Adults Board

- 7.1 The Safeguarding Adults Board has not met this quarter, the 9th December meeting was cancelled. The next meeting is planned for 9th March 2016.

8. Mental Capacity Act Steering Board

- 8.1 The London Purchased Healthcare (LPH) team have been asked by NHS England London Region to create a framework for equipping CCG MCA leads with the required tools (a toolkit) and understanding to ensure MCA compliance within the services they commission. The scope of the work covers acute settings, care homes, domiciliary care, mental health facilities and offender health facilities.

- 8.2 To this end Merton CCG's DASM attended the London MCA Steering Board forum on 11th December, with a final meeting planned for in quarter 4, 18th March 2016, with the function being created:

- Enhance member's knowledge of commissioning for the MCA
- Develop consistent MCA practice across London commissioners

- Share and develop best practice in commissioning for the MCA with the use of a toolkit expected for circulation by March 2016.

9 Prevent

- 9.1 MCCG's DASM completed the Workshop to raise awareness of Prevent (WRAP) in February 2015, The DASM has maintained close links with NHS England's dedicated Prevent team and attended the NHS England London Region's Prevent forums and the NHSE Prevent annual conference in December 2015. Since 1st October MCCG's DASM has built up a good partnership relationship with Merton's Metropolitan police Prevent liaison and engagement officer. Further Prevent awareness training for MCCG staff is planned for quarter 4.
- 9.2 Merton CCG has maintained the quarterly statistic returns to NHSE Prevent team relating to staff training and Prevent concerns/ referrals and has received none this quarter.
- 9.3 MCCG is now required by law to act to prevent radicalisation. This duty introduced as part of the Counter-Terrorism and Security Act 2015, requires health bodies as well as schools, local authorities, prisons and police to have 'due regard to preventing people from being drawn into terrorism'. The 'Prevent' agenda is outlined in the Department of Health document Building Partnerships, Staying Safe – The Healthcare Sector's contribution to HM Government's Prevent Strategy: For Healthcare Organisations.
- 9.4 Prevent delivery is now also a specified requirement within the NHS Standard Contract for provider organisations. The Prevent agenda requires healthcare organisations to work with partner organisations to contribute to the prevention of terrorism by safeguarding and protecting vulnerable individuals who may be at a greater risk of radicalisation.
- 9.5 Key elements of this work for Merton CCG are to raise awareness of the requirements among staff by training; there is an accredited e learning package available, and staff have been encouraged to access this following a presentation by the DASM at the November staff meeting.
- 9.6 Merton CCG's DASM is expected to become a Channel panel member, a multi-agency forum that receives Prevent referrals, as soon as approved by the group.

10 Conclusion and recommendation

The aims of our safeguarding adults who receive services commissioned by Merton CCG for the next Quarter and beyond are to:

- Commission services to ensure, first and foremost that adults with care and support needs are safe.
- Maintain the discharge our statutory functions as a CCG.

- Work alongside neighbouring Clinical Commissioning Groups, the Local Authority, CQC and Voluntary groups to maintain a consistent approach and response to the need for our resident population.
- Encourage, embed and maintain the best safeguarding practice across the Merton health economy.
- Ensure continuous improvement and compliance with national and local policies.
- Review existing systems for quality monitoring to ensure that they remain robust, auditable, effective and in line with Merton Safeguarding Adults Board (MSAB).
- Ensure partnership working and contribution to the work of the MSAB.
- Ensure partnership working with Children's safeguarding services, particularly around common themes such as Prevent, FGM and Domestic violence that can affect all age groups.
- Effectively contribute to local multi-agency approaches such as the Multi-agency Public Protection Arrangements (MAPPA); Multi-agency Risk Assessment Conference (MARAC); Early Help Multi-agency Safeguarding Hubs and/or Multi-agency Safeguarding Hubs; Domestic Homicide Reviews, PREVENT & Channel processes and Domestic Abuse forums.
- Implement and embed the Care Act 2014, in particular, Making Safeguarding Personal and the Mental Capacity Act and DoLs compliance especially within Care homes.

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