

**NHS Northamptonshire
Clinical Commissioning Groups**

**Safeguarding
Annual Report
2018-2019**

**Children and Adults at Risk
Safeguarding Northamptonshire people
from harm and exploitation**

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1. Introduction

This report reviews the work undertaken by Northamptonshire Clinical Groups' (CCGs) safeguarding team during 2018-2019.

2. Purpose

The CCGs have discharged statutory responsibility to safeguard the welfare of children and adults, building on previous Safeguarding Annual Reports.

The report also identifies planned areas for development for 2019-2020. The report will be shared with the newly formed Northamptonshire Safeguarding Children's Partnership (NSCP) and Northamptonshire Safeguarding Adults Board (NSAB).

Abbreviations and acronyms are at the back of this report on page 21.

3. Executive Summary

During 2018/2019 the CCGs' Safeguarding Team worked closely as a statutory partner with the Children and Adult Safeguarding Boards in developing the board's business plans, in line with the complex changing landscape of children and adult safeguarding arrangements.

The CCGs have been working hard to plan the forthcoming changes regarding the Safeguarding Children Board arrangements in response to the Wood Review. Equally, work has been undertaken to improve the structure and effectiveness of the Safeguarding Adult Board, with a view to aligning where possible the Adult and Children's Partnership/Boards. Northamptonshire CCGs are part of a positively influencing collaboration between the Safeguarding Children and Adult Boards, and the Community Safety Partnership. All three Boards/Partnerships have key themes in common, such as tackling Domestic Violence, Exploitation, and providing a coordinated multi-agency response when people are in need of early intervention.

Northamptonshire CCGs are responsible for commissioning (planning and buying) healthcare services for local people across a large area of Northamptonshire, which includes Daventry, Northampton, Wellingborough, Kettering East and South Northamptonshire.

The county has experienced significant population growth in recent decades. In the last 30 years the population of Northamptonshire has increased by just over 30% compared to a 16.8% England average. This population growth is set to continue.

The CCGs are judged on whether we improve outcomes for local people and that we commission safe services to ensure the NHS Constitution standards are met. To achieve the Safeguarding Team's objectives for 2018/2019 we were able to demonstrate that we:

- ❖ Influenced the commissioning, contractual and procurement process in relation to Providers' safeguarding arrangements.
- ❖ Held providers and senior leaders to account where there have been risks identified across the system through the Accountability and Assurance Framework.
- ❖ Developed good working relationships with Northamptonshire County Council, health services and partners to create a culture of openness, transparency and challenge.

4. Background Context

The county is middle ranking amongst the 152 county and unitary authorities in terms of pockets of high deprivation:

- Corby
- Northampton
- Wellingborough

16.2% of the county's population live in areas designated as deprived in the 2015 Index of Multiple Deprivation- higher proportions of children than the county's non-deprived areas:

- Just over 20,000 of children aged 0-15 year olds live in low income families.
- 17,500 live in out of work benefit households.
- Around 1,700 dependent children live in households affected by the benefit cap. Levels of teenage pregnancy across the county are higher than the England average and 17.0% of 11 year olds countywide are classified as obese, but this rises to 21.1% in Corby.

At the end of December 2018, Northamptonshire had an approximate population of 165,400 children. The number of children receiving support from services was as follows:

- 2,193 children had been identified through assessment as being formally in need of a specialist child in need service. This is lower than the national average per 10,000 children.
- 712 children and young people were the subject of a child protection plan (a rate of 43.1 per 10,000 children). This is in line with the national average per 10,000 children.
- 1,118 children were being looked after by the local authority (a rate of 67.6 per 10,000 children):
 - 307 (or 27%) live outside the local authority area.
 - 115 live in residential children's homes, of which 44% live outside the authority area.
 - 5 live in residential secure units.
 - 831 live with foster families, of whom 23% live outside the authority area.
 - 29 live with parents, of whom 10% live outside the authority area.
 - 99 are unaccompanied asylum-seeking children.
 - This is higher than the national average per 10,000 children.

5. Who we are and what we do

The CCGs commission (or buy) health services from organisations that provide health services. In Northamptonshire most healthcare is provided by General Practitioners (GPs) and NHS trusts, but other organisations from the voluntary and private sectors also have contracts to provide some services.

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. The CCGs have a responsibility under the Care Act 2014 for safeguarding Adults.

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.

Table 1 describes the CCGs' objectives, how we measure success and what safeguarding outcomes we set to keep people safe from harm and exploitation.

Table 1: CCGs Objectives and Safeguarding Outcomes

Objective	Key Measures of Success	Safeguarding Outcomes
Improve Health Outcomes	Reduce the gap in life expectancy between Northamptonshire and England	Ensuring people have a positive experience of care. Treating and caring for people in a safe environment and protecting them from avoidable harm, abuse or exploitation.
	Reduce the gap in life expectancy between different parts of the county	
Improve quality of care and patient experience of care	Achievement of key NHS performance targets	
	Patients and carers would recommend health services	
Best value: receiving care closer to home	Reduce emergency hospital admissions	
	Reduce length of stay in hospital	
	Reduce readmissions to hospital	

6. Key Achievements 2018/2019

The CCGs' Safeguarding Team has undertaken a significant amount of work to deliver on its objectives. These are:

- Development of the new Safeguarding Strategic Partnership arrangements in line with Working Together 2018.
- MCA and DoLS training programme for staff across the health economy.
- Establishment of local reporting arrangements from providers to the CCGs of the numbers of women presenting to health services (primarily maternity services) who have undergone FGM.
- Implementation of CP-IS across the health economy in Northamptonshire.
- Supporting the whole system transformation of the Multi Agency Safeguarding Hub (MASH).
- Section 11 audits undertaken across the health economy.
- Improved process for safeguarding information sharing across General Practice.
- Full implementation of the GP safeguarding manual including modular train the trainer safeguarding programme.
- Development of train the trainer materials in partnership with the police for gang awareness.
- Roll out of the domestic abuse risk assessment framework for general practice - **GP Risk Assessment Coercion and Escalation**.
- Strengthened quarterly Safeguarding Forums for General Practice.
- FGM - awareness raising training to general practice.
- Domestic abuse training across the health economy for adults and children's safeguarding professionals.
- Successful roll out of multi-agency Gangs awareness training.

7. Business as usual activity

- We have strengthened safeguarding arrangements in Primary Care GP Services including relevant safeguarding training.
- Provide assurance through safeguarding audits with providers.
- Safeguarding assurance across CCGs commissioned services.
- Pathways to support GP engagement in the MARAC.
- (Multi-agency risk assessment conferences) process has been delivered.
- Health has been an integral part of Northamptonshire's Multi-Agency Safeguarding Hub (MASH).
- CCGs' senior leadership team (Executive and Board) have received specialist strategic safeguarding leadership training.
- Awareness of domestic abuse and violence has been successfully implemented across Primary Care.

- Providing safeguarding supervision to all named safeguarding professionals across the health system.
- Carry out Safeguarding assurance visits to local providers for children and adult services.

8. The Role of Designated Safeguarding Professionals within the CCGs

Designated Safeguarding Professionals are accountable to NHS England and are hosted by CCGs. This is to support the local safeguarding arrangements. The Accountability and Assurance Framework 2015 sets out the statutory requirements for CCGs, including the requirement to employ or have access to Designated Professionals.

The Designated Professional's role is to work across the local health system to support other professionals in their agencies on all aspects of safeguarding and child protection. Designated Professionals are clinical experts and strategic leaders for safeguarding and as such are a vital source of advice and support to health commissioners in CCGs, the Local Authority and NHS England, other health professionals in provider organisations, governance committees, regulators, the Safeguarding Boards, Community Safety Partnerships and Health and Well Being Boards.

9. CCGs' Safeguarding Team

The Safeguarding Team is a fundamental part of the CCGs' commissioning and contractual process. We support and advise the CCGs' Executive Leadership Team and submit regular safeguarding management reports through the governance structure.

The CCGs' Safeguarding Team seeks assurance from providers regarding their safeguarding arrangements through contractual arrangements:

Leading and oversight of safeguarding assurance and improvement across the health economy;

- Monitoring services across the health economy to ensure adherence to legislation, policy and key statutory and non-statutory guidance;
- Undertaking safeguarding audits;
- Conducting safeguarding assurance visits;
- Observation of health providers attendance at local safeguarding forums/groups/multi-agency groups;
- Observation of healthcare providers attendance at local safeguarding boards, executive groups and safeguarding sub-groups;
- Submitting safeguarding reports to the CCGs' Joint Quality Committee;
- CCGs' Safeguarding Team attendance at provider safeguarding committees;
- Undertaking section 11 audits.

10. Statutory Frameworks and National Policy Drivers

10.1 Working Together to Safeguard Children 2018

Published on 4th July 2018, Working Together to Safeguard Children 2018 sets out new requirements for improved partnerships to protect children. Strengthened guidance sets new legal requirements for the three safeguarding partners, who will be required to make joint safeguarding decisions to meet the needs of local children and families.

The new guidance is aimed at all professionals who come in to contact with children and families and includes guidance on current threats to child protection, such as sexual and criminal exploitation, gangs and radicalisation.

CCGs, council and police leaders will jointly be responsible for setting out local plans to keep children safe and will be accountable for how well agencies work together to protect children from abuse and neglect.

The main changes are that:

- ❖ There are now three organisations in Northamptonshire who are jointly responsible for the partnership arrangements for keeping children safe:
 - Northamptonshire County Council.
 - Northamptonshire Police.
 - Northamptonshire Clinical Commissioning Groups (Nene CCG and Corby CCG).
- ❖ The Northamptonshire Safeguarding Children Board will change its name to the Northamptonshire Safeguarding Children Partnership.
- ❖ The Partnership will adopt a new structure which includes someone independent who will challenge its work and focus on learning.
- ❖ At the heart of the arrangements is a commitment from all agencies to work together to keep children safe and to continuously improve working practices and to learn how to best do this.

11. Ensuring Effective Arrangements for Information Sharing

Effective sharing of information between practitioners and local organisations and agencies is essential for early identification of need, assessment and service provision to keep children safe.

Serious case reviews have highlighted that failure to record, understand the significance of and share information in a timely manner can have severe consequences for the safety and welfare of children.

During the reporting period significant changes to the law and guidance relating to data processing were introduced.

11.1 The Data Protection Act 2018 and General Data Protection Regulation (GDPR) 2018

The Data Protection Act 2018 is a United Kingdom Act of Parliament that updates current Data Protection laws in the UK. Its main purpose is to implement the European Union's General Data Protection Regulation (GDPR) in national law, in preparation for the UK's withdrawal from the union in 2019. This:

- ❖ Makes our data protection laws fit for the digital age in which an ever-increasing amount of data is being processed; and
- ❖ Empowers people to take control of their data.

The GDPR and Data Protection Act 2018 do not prevent, or limit, the sharing of information for the purposes of keeping children and young people safe. The most important consideration is whether sharing information is likely to support the safeguarding and protection of a child.

Information which is relevant to safeguarding will often be data which is considered 'special category personal data', meaning it is sensitive and personal.

Where practitioners need to share special category personal data, they should be aware that the Data Protection Act 2018 includes 'safeguarding of children and adults at risk' as a condition that allows practitioners to share information without consent.

Relevant personal information can be shared lawfully if it is to keep a child or adult at risk safe from neglect or physical, emotional or mental harm, or if it is protecting their physical, mental, or emotional well-being. Information can be shared legally without consent, if a practitioner is unable to, cannot be reasonably expected to gain consent from the individual, or if to gain consent could place a child at risk.

Fears about sharing information must not be allowed to stand in the way of the need to promote the welfare, and protect the safety, of children, which must always be the paramount concern. To ensure effective safeguarding arrangements:

- Practitioners must have due regard to the relevant data protection principles which allow them to share personal information, as provided for in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR).
- Practitioners looking to share information should consider which processing condition in the Data Protection Act 2018 is most appropriate for use in the particular circumstances of the case. This may be the safeguarding processing condition or another relevant provision.

12. Safe Recruitment

The CCGs adhere to the national standards for all pre-employment checks, including the requirement for DBS checks. An understanding of the role and the requirement for a Disclosure and Barring Scheme (DBS) check will be discussed with the manager of the role, utilising the government guidance available at the time of advertisement.

For those staff requiring a DBS, the CCGs will require a new disclosure every 3 years.

13. Partnership Working and Assurance

13.1 Safeguarding strategy and associated action plan

The CCGs, in recognizing their role to ensure the health economy works together, agreed a 3 year Safeguarding Strategy with providers endorsed by the CCGs' Joint Quality Committee and refreshed in July 2017. Good progress has been made in completing the actions.

13.2 Health Strategic Safeguarding Forum

The strategic and operational planning, delivery and monitoring of all NHS safeguarding activity is managed through the Health Strategic Safeguarding Forum, which initially met monthly, moving to quarterly.

13.3 The Northamptonshire Safeguarding Adults Board (NSAB)

The CCGs remains a committed partner to the Board, ensuring alignment in relation to the Boards priorities and those established within health.

13.4 Named/Designated Professionals Forums

Northamptonshire's Named and Designated safeguarding professionals from across the NHS meet regularly to agree and operationalise the action plans associated with the NHS safeguarding priority action plan. These meetings are utilised to share learning and good practice across the health economy.

13.5 Provider Safeguarding Meetings

Safeguarding meetings are chaired by the Director of Nursing of each organisation. All aspects of safeguarding activity within the organisations are discussed. The CCGs Designated Nurses' attends these committees providing opportunity for external scrutiny of progress and a conduit for information sharing.

14. Children's and Adult Safeguarding: CCGs Contribution to Multi-Agency Safeguarding Priorities

14.1 Early Help

Working Together 2018 states "Providing Early Help is more effective in promoting the welfare of children than reacting later. Effective early help relies upon local organisations and

agencies working together to:

- Identify children and families who would benefit from early help.
- Undertake an assessment of the need for early help.
- Provide targeted early help services to address the assessed needs of a child and their family which focuses on activity to improve the outcomes for the child.

“Early Help means providing support as soon as a problem emerges, at any point in a child’s life, from the foundation years through to the teenage years. Early Help can also prevent further problems arising; for example, if it is provided as part of a support plan where a child has returned home to their family from care, or in families where there are emerging parental mental health issues or drug and alcohol misuse.”

NHS Northamptonshire CCGs are fully committed to early help processes, recognising that failure to intervene early can lead to significant harm and an increase in health needs to children and families. Early Help processes are a safeguarding standard within the provider contract and assurance is sought that providers of services commissioned by the CCGs are fully engaged with early help processes.

Early Help has been identified by the Safeguarding Strategic Partnership as a key priority for 2019/20 with a specific multi-agency sub group set up to focus on this over the next year.

14.2 The Child Protection – Information Sharing Project (CP-IS)

CP-IS is a NHS England sponsored work programme through which key local authority information pertaining to children and unborn babies subject to Child Protection Plans and those with Looked After Child status is shared with unscheduled care providers in health. During the reporting period there has been full rollout of the project and this is now fully operational.

14.3 Complex Safeguarding

Complex Safeguarding is a term used to describe criminal activity (often organised) or behaviour associated with criminality, involving often vulnerable children where there is exploitation and/or a clear or implied safeguarding concern. Examples included in this description are child sexual exploitation, trafficking, modern slavery, forced/sham marriages, gangs, female genital mutilation, radicalisation and extremism. The CCGs work with partner agencies to address the needs of those vulnerable to or involved in these categories of abuse.

14.4 Female Genital Mutilation – Risk Identification System

Female Genital Mutilation (FGM) is illegal in the UK, as is taking a child abroad to undergo FGM, as legislated in the 2003 Female Genital Mutilation Act. It is also recognised as a form of child abuse. FGM is medically unnecessary, extremely painful and has serious health consequences both at the time when the mutilation is carried out and in later life.

There are 3 specifics for NHS organisations to share information, these are:

- FGM-RIS;
- The FGM Mandatory reporting duty that was introduced in 2015, following an amendment to the Serious Crime Act. This places a duty on all health practitioners to report any girl under the age of 18 who has had FGM to the police as a criminal act; and
- The enhanced data set, whereby all NHS Trusts submit FGM figures to the Department of Health in an attempt to have accurate statistics of exactly how many women/girls in this country have undergone FGM and /or are living with the side-effects of FGM.

FGM-RIS is a national web based information sharing system which:

- Highlights a family history of FGM to protect and safeguard a girl under 18;
- Shares information on the record of a child under 18; and
- Prompts clinicians treating a girl that she has a family history of FGM.

14.5 Child Exploitation

Child exploitation is another of the key priorities for the Safeguarding Strategic Partnership, recognising the interdependencies in the various forms of exploitation.

The priorities and actions identified in the strategy have been informed by analysis of local data and practice, as well as from the experiences of front-line practitioners, children and parents. It is the aim of this strategy and the Sexual Exploitation Steering Group to bring together agencies from a range of settings to share their knowledge, expertise and passion for this area of work and to make a real impact to:

- Reduce the likelihood of children becoming victims of child sexual exploitation;
- Ensure action is taken to safeguard children at risk of sexual exploitation; and
- Target, disrupt and prosecute the perpetrators of child sexual exploitation.

The CCGs have endorsed the CSE strategy and has made a commitment to the local delivery of the strategy. The CCGs contribution relates to the commissioning of therapeutic services for children recovering from trauma, continuing to contribute to the multi-agency approach of preventing and protecting children from sexual exploitation and taking effective action to disrupt offenders.

14.6 Missing from Home

Children and young people are particularly vulnerable to exploitation when missing from home or care. The main reasons for children going missing are identified as:

- Difficult Family Relationships
- Emotional Health Needs
- Neglect/home conditions
- Peer Pressure

The Northamptonshire CCGs ensure that services are commissioned that address the

emotional health and wellbeing of children and the effectiveness of services is reviewed through assurance processes.

The CCGs work closely with policy, providers and the local authority to ensure that services work in a coordinated way to support this vulnerable group. Additional oversight and assurance is sort for children who are looked after as the incidence of “missing” episodes are particularly prevalent for this group of children and young people.

Children and young people may attend their GP with physical or emotional health issues related to their missing episodes, or have difficulties which precede the episode. The CCGs support primary care GP services to improve awareness of specific children and young people who go missing or at risk of going missing to allow for a more holistic approach to family medical/health support.

Often family members e.g. carers, will be attending the GP either to seek support in managing their child’s behaviour, or due to their own health issues which may be having an adverse impact on the child increasing their risk of going missing.

14.7 Safeguarding in General Practice

GP Portal: Safeguarding information has been included on the GP Portal. Content includes a variety of training materials and links, including presentations on a range of safeguarding topics. Practice leads can book training events through the website which contains an up-to-date directory of safeguarding services.

Train-the-trainer programme: Training days during 2018/19 covering the child, family, adult and practice modules including a panel question time and a session to share ideas on how to deliver training to the practice team.

Practice assurance: Spreadsheet recording practice engagement including a traffic light section which records the occurrence and response of practices to child and adult safeguarding incidents.

GRACE framework: Practices can request training on victim risk assessment following a disclosure of domestic abuse, to inform management strategies and referral to local services.

Safeguarding Assurance Tool: Developed to support practices and the newly formed Primary Care Networks to benchmark themselves regarding their safeguarding arrangements. This will be rolled out to all practices over the next 12 months.

15. Serious Case Review

A serious case review is a local inquiry carried out when a child has died or has been seriously harmed and abuse and neglect are suspected, and there is cause for concern about professionals working together.

The Northamptonshire Safeguarding Children Board commissioned two Serious Case Reviews conducted during the period 2018-19. June 2019 saw the publication of the overview reports on AK and AP (see Appendix 2). A key recommendation from the reviews related to how services work effectively and communicate to best meet the needs of children/families. This recommendation will be progressed by the CCGs and monitored via the Strategic Health Safeguarding Forum with final sign off by the Strategic Safeguarding Partnership.

The recommendations and learning for health providers is supported and overseen by the CCGs in the form of actions logs, with strategic oversight and sign off by the Safeguarding Children's Strategic Partnership.

16. Multi-Agency Safeguarding Hub (MASH)

Within the reporting period there have been significant legislative and system changes which will have an impact on how safeguarding functions are delivered locally through the establishment of the new Multi-Agency Safeguarding Hub (MASH). There will be a strong focus in 2019/20 to ensure the new arrangements are effective in the safeguarding and promotion of the welfare of children.

To ensure that there is continuous improvement in the provision of safe services there will be a process of review of the way safeguarding is currently delivered and to learn from incidents, child safeguarding reviews, the voice of the child, peer reviews and inspections to ensure services are safe and protect children.

There will also be changes to the way reviews of children who die or are seriously harmed as a consequence of abuse or neglect are undertaken; moving responsibility for the review of all child deaths from Northamptonshire Safeguarding Children Board to the CCGs and Local Authority. Serious Case Reviews will be called Child Safeguarding Practice Reviews but will continue to be a learning process for organisations and individual practice, identifying improvements to be made locally and nationally to safeguard and promote the welfare of children.

The Designated Doctors and Nurses have continued to support the MASH through attendance at the MASH operational and strategic management groups. An identified objective for the reporting period was to participate in a multiagency review of the effectiveness of the MASH.

17. Safeguarding Adults

Safeguarding adult priorities:

- Further seek assurance from health providers around their safeguarding arrangements.
- Implement the Intercollegiate document in Safeguarding Adults
- Forward Plan for the forthcoming DoLS changes.

17.1 Safeguarding Adult Self-Assessment and Assurance Framework (SAAF)

The tool is still being used across the county. However a pilot is currently underway with Kettering General Hospital to develop a Safeguarding Assurance Tool (SAT), similar to that used by the CCGs, for completion by providers. This would then replace the current SAAF process.

17.2 Domestic Abuse

Domestic Abuse and Violence is endemic across England and Wales; in Northamptonshire the position is the same and is a local priority.

As domestic abuse is a priority area some initial scoping has been undertaken and this will be further developed through a multi-agency Domestic Abuse and Violence profile and needs assessment for our local area.

The Designated Nurse for Safeguarding Adults has played a pivotal role over the last year in supporting the MARRAC process and maintaining surveillance on the Independent Domestic Violence Advisor (IDVA) service commissioned by the CCGs into the acute providers. This will remain a key area of focus over the coming year.

Northamptonshire CCGs and local GP Practices have worked hard to ensure that domestic abuse and violence is identified and responded to in a timely way.

The CCGs' Head of Nursing and Safeguarding has worked closely with partner agencies and the Northamptonshire Community Safety Partnerships around a joint Domestic Abuse Strategy for the County.

Work has progressed to strengthen notifications to GPs around Multi Agency Risk Assessment Conferences (MARAC). However this will remain an area of focus for the year ahead.

A workplace Domestic Abuse and Violence (DAV) policy was developed by the CCGs Safeguarding Team and launched at CCGs staff briefing.

17.3 Safeguarding Adult Review (SAR)

There has been an unprecedented number of cases discussed as part of the SAR process. Two Safeguarding Adult reviews commenced. The increased activity has significantly impacted on the Safeguarding team's allocated resource and will remain a challenge to administer during the coming year.

Some of the key recommendations for health services from the published SARs include:

- Further actions to support the recognition and assessment of neglect
- The need to recognise the increasing gang activity across the county.

17.4 Domestic Homicide Review (DHR)

A domestic homicide is defined as ‘a review of the circumstances in which the death of a person 16 years or over has, or appears to have, resulted from violence, abuse or neglect by a person to whom they were related, or a person with whom there was or had been an intimate personal relationship, or a member of the same household.’

One DHR from the Northampton Community Safety Partnership (CSP) been published in this reporting period. Two other DHRs, commenced in the previous reporting year, remain in the Panel process; one from the East Northants CSP, the other Northampton CSP. The CCGs’ Designated Nurse has been a DHR panel member. There has been a fourth DHR which is on-going.

17.5 Mental Capacity Act and Deprivation of Liberty Safeguards

Legal judgments on the Mental Capacity Act (MCA), Deprivation of Liberty Safeguards (DoLS) have had a significant impact on our services. These cases have placed additional responsibilities on social care and care providers to conduct mental capacity assessments and ensure that appropriate safeguards are in place.

17.6 Prevent Agenda

In April 2015, the Prevent Statutory Duty under Section 26 of the Counter-Terrorism and Security Act 2015 was made a statutory responsibility for the health sector. The Duty stated that the health sector needed to demonstrate “due regard to the need to prevent people from being drawn into terrorism”.

Prevent is part of the UK’s Counter Terrorism Strategy known as CONTEST. Prevent works to stop individuals from getting involved or supporting terrorism or extremist activity. Radicalisation is a psychological process where vulnerable and/or susceptible individuals are groomed to engage in criminal, terrorist activity.

The Prevent Programme is designed to safeguard people in a similar way to safeguarding processes to protect people from gang activity, drug abuse, and physical and sexual abuse.

The Designated Nurse for Safeguarding Adults plays a pivotal role in the CHANNEL Panel process and seeking assurance of effectively PREVENT training delivery across the health system.

17.7 Mental Capacity Act 2005 (MCA)

MCA is included in the NHS standard contract and also forms part of the local Quality Schedules. As reported in previous years, MCA is still not fully integrated into practice. Considerable work has been undertaken by the CCGs to help improve awareness, understanding and practice through the use of NHS England MCA project funds.

17.8 The Deprivation of Liberty Safeguards 2009 (DoLS)

The CCGs are continuing to monitor the activity of DoLS across the health providers as part of the SAAF and quality monitoring visits. The CCGs note that increased activity remains a significant pressure on the local authority DoLS Team. There are lengthy delays in providers obtaining assessments for DoLS standard authorisations.

18. Summary and Conclusion

Health agencies continue to experience challenges determined by the complex health economy across Northamptonshire. Our providers have ensured a focus on their safeguarding responsibilities and deserve much credit.

The work to safeguard children and adults via health agencies across the county is effective and there are repeated examples of good practice and improved outcomes for children and adults.

There is also evidence of a greater awareness amongst health agencies of the need to share issues of concern about adults at risk, and of the need to ensure that the workforce are trained to the required level of competency to fulfil their statutory responsibilities.

We must ensure the learning from Serious Case Reviews and other reviews is disseminated and implemented thoroughly. Organisations must continue to support staff with the complexity of practice and decision making through on-going training, effective regular supervision and systems of good line management.

We are asking the CCGs' Joint Quality Committee to note content and progress and accept this report as assurance that we are meeting the statutory requirements for safeguarding children and adults and they continue to support the CCGs' Safeguarding Team to meet the responsibilities highlighted in this report.

The Safeguarding Team has worked tirelessly to ensure all safeguarding processes are robust and effective, this has been despite workforce challenges and wider statutory changes.

The Safeguarding Team are looking forward to the year ahead in ensuring that safeguarding remains a high priority for the CCGs and providers.

Final words from the Safeguarding Executive Lead

I am pleased to present the Children and Adult Safeguarding Annual Report on behalf of NHS Northamptonshire CCGs for the year 2018-2019.

I became the CCGs' Safeguarding Executive Lead in March 2019 and I am pleased to demonstrate in this report the team's achievements in delivering this year's safeguarding objectives which aimed to safeguard the people of Northamptonshire from harm and exploitation.

We are now ready to focus on the challenges for 2019-2020. The CCGs need to continue to take the lead in supporting our most vulnerable in society and creating an inclusive commissioning culture. This will enable the CCGs to work towards achieving their aim of improving health outcomes and reducing the disparities in life expectancy.

In 2018/19 we took the first steps towards implementation of Working Together 2018 with the new Safeguarding Partnership arrangements launched in June 2019.

The year ahead will not be easy, but with the expertise and experience of the CCGs' Safeguarding Team and with the opportunity to develop the team further, work collaboratively with our health and social care partners, and work with the wider community, I believe we can meet the challenges ahead.

Angela Dempsey
Chief Nurse and Quality Officer
Northamptonshire Clinical Commissioning Groups

Author:
Tina Swain, Head of Nursing & Safeguarding

APPENDIX ONE: Abbreviations and Acronyms

Abbreviation	Acronym
NSAB	Northamptonshire Safeguarding Adult Board
NSCB	Northamptonshire Safeguarding Children Board
NSCP	Northamptonshire Safeguarding Children Partnership
CAMHS	Child Adolescent Mental Health Services
CCG	Clinical Commissioning Group
CDOP	Child death overview panel
CP-IS	Child Protection Information Sharing Project
CSE	Child Sexual Exploitation
CSP	Community Safety Partnership
DBS	Disclosure Barring Service
DHR	Domestic Homicide Review
DoLS	Deprivation of Liberty Safeguards
FGM	Female Genital Mutilation
GDPR	General Data Protection Regulation
JTAI	Joint Targeted Area Inspection
MARAC	Multi-agency Risk Assessment Conferences
MASH	Multi-Agency Safeguarding Hub
MCA	Mental Capacity Act
MSP	Making Safeguarding Personal
NHSE	NHS England

APPENDIX TWO: References

10.1 Working Together to Safeguarding Children 2018

Revised Working Together to Safeguard Children statutory guidance; and Local Safeguarding – Transitional Arrangements statutory guidance. Both can be found at www.gov.uk/working-together-to-safeguard-children-2

Northamptonshire has published its new safeguarding arrangements as set out in Working Together 2018. You can read the full transition document here: <http://www.northamptonshirescb.org.uk/>

11.1 The Data Protection Act 2018 and General Data Protection Regulation (GDPR) 2018 Further information is available through the link below.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/721581/Information_sharing_advice_practitioners_safeguarding_services.pdf

15. Serious Case Review

Within Northamptonshire two serious case reviews were published in June 2019:

1. Overview report for AK

<http://www.northamptonshirescb.org.uk/assets/legacy/getasset?id=fAA0ADYAOQB8AHwAVABYAHUAZQB8AHwAMAB8AA2>

- Step briefing for AK

<http://www.northamptonshirescb.org.uk/assets/legacy/getasset?id=fAA0ADcANQB8AHwAVABYAHUAZQB8AHwAMAB8AA2>

2. Overview report for AP

<http://www.northamptonshirescb.org.uk/assets/legacy/getasset?id=fAA0ADcAMAB8AHwAVABYAHUAZQB8AHwAMAB8AA2>

- Step briefing for AP

<http://www.northamptonshirescb.org.uk/assets/legacy/getasset?id=fAA0ADcANAB8AHwAVABYAHUAZQB8AHwAMAB8AA2>