Safeguarding Committee

Held on Monday, 7 September 2015 1.00pm at
Birch House, Ransomwood Business Park, Mansfield

Present:
Elaine Moss  Chief Nurse, Newark and Sherwood and Mansfield and Ashfield CCGs (Chair)
Val Simnett  Designated Nurse Safeguarding Children, Newark & Sherwood CCG
Dr Vicki Walker  Designated Doctor for Children in Care and named doctor for M&A and N&S CCGs (from item 96)
Amanda Jones  Adult Safeguarding Lead, NHS Nottingham North and East CCG
Amanda Edmonds  Designated Nurse Children in Care Nottinghamshire and Nottingham City (from item 96)
Gail Colley- Bontoft  Head of Quality and Adult Safeguarding, Nottingham North and East CCG
Gary Eves  Senior Public Health and Commissioning Manager, Nottinghamshire County Council (from item 96)
Nicola Ryan  Deputy Chief Nurse, Bassetlaw CCG
Mary Corcoran  Consultant in Public Health, Nottinghamshire County Council (item 1-101)

In attendance:
Sue Wass  Corporate Governance Officer (minutes)
Charlotte Tyler  Project Manager for Learning Disabilities and Mental Health, Newark and Sherwood CCG (item 1-101)

ADULT SAFEGUARDING AGENDA

WELCOME AND INTRODUCTIONS (SG/15/84)
The Chair welcomed members to the meeting and introduced Gail Colley-Bontoft, the recently appointed Head of Quality and Adult Safeguarding for Nottingham North and East CCG.

APOLOGIES FOR ABSENCE (SG/15/85)
Apologies were received from Cathy Burke, Nichola Bramhall, Rebecca Stone, Dr Fiona Straw, Dr Emma Fillmore, Dr Amy Taylor, Dr Rebecca Sands and Amanda Callow.

DECLARATIONS OF INTEREST (SG/15/86)
No declarations of interest were made in relation to the agenda.

MINUTES OF THE ADULTS SAFEGUARDING COMMITTEE HELD ON 10 JULY 2015 (SG/15/87)
The minutes were agreed as an accurate record of the meeting.
MATTERS ARISING (SG/15/88)
The following actions arising from the previous meeting were noted:

- **AS/14/46 NSAB PRESENTATION:** Elaine Moss had discussed with Paul Mckay and the shared risk would be identified initially through the NSAB. Action closed

- **AS/14/75 FORWARD LOOK**
  GP member to be requested going forward. Nichola Bramhall will be asked for an update the position for the south at the next meeting.

All other actions were noted as completed.

REPORTS (SG/15/89)

DEPRIVATION OF LIBERTY
Elaine Moss introduced the report for information, which had been compiled from a presentation given by Browne Jacobson. The proposal was to reform the law around this issue to simplify the approach, linking it to UN guidance and the Mental Capacity Act.

Feedback from the audience at the presentation centred on the need to simplify terminology for families and patients; its application to self-funders; and accountabilities. It was noted that this would be a long process, with the bill not becoming law until 2018; and the CCGs would respond to consultation on the bill in due course.

INTERNATIONAL PREVALENCE MEASUREMENT OF CARE PROBLEMS IN CARE HOMES
Amanda Jones reported on an initiative supported by the East Midlands Academic Health Science Network to help care homes prevent the occurrence of pressure ulcers. The report would also be taken to the NSAB. Mary Corcoran asked whether aggregated data for the project would be available. This could be accessed via Cheryl Crocker at EMASN.

LOCAL UPDATES (SG/15/90)

NSAB
Nicola Ryan reported on a number of issues discussed by the Board. They had queried the role of the new Designated Adult Safeguarding Managers. Additional guidance was awaited, but was considered that this issue should be put on the Committee’s forward agenda to look at how best to support the role and lessons learnt to date.

  - **ACTION:** Sue Wass to add DASM role to the forward agenda.

The role of NHS England representation on the Board was also raised, with the Chair agreeing to take this forward with the relevant individuals; and a prison representative would be sought. The next agenda would include items on PREVENT and mental health beds.

JOINT SAFEGUARDING AGENDA

DECLARATIONS OF INTEREST (SG/15/93)
No declarations of interest were made in relation to the agenda.
MINUTES OF JOINT SAFEGUARDING MEETING HELD 10 JULY 2015 (SG/15/94)
The minutes were agreed as an accurate record of the meeting.

MATTERS ARISING (SG/15/95)
- SG/15/57 KPIs: It was agreed to look at KPIs for the committee at the facilitated session discussed under item SG/15/100. Action closed.
- SG/15/58 DISCLOSURE AND BARRING: work was in progress and a report would be tabled at the next committee.
- SG/15/59 DOMESTIC ABUSE: Mary Corcoran offered to check health representation on the Mansfield and Ashfield CSP meetings. The chair agreed to represent the CCG if required and asked that minutes of the meetings be circulated in order to identify any health safeguarding issues.
- SG/15/64 COMBINED RISK REGISTER: Updates were requested for the next Committee.
- SG/15/65: Enclosed for noting, the safeguarding policy, strategy and committee annual report had been circulated for virtual approval, with minor amendments made. They would be sent to governing bodies for ratification.
  - All other outstanding actions were noted as completed.

REPORTS (SG/15/96)

THEMES AND LESSONS LEARNT FROM THE NHS INVESTIGATIONS INTO MATTERS RELATING TO JIMMY SAVILE
Letters had been circulated from NHS England and Monitor to all organisations in response to the inquiry into the activities of Jimmy Savile across the NHS. CCGs had been tasked to seek assurance that providers had actioned the recommendations in the Lampard report into ‘lessons learned’. The Chair asked for an assurance report to record progress and any outstanding actions for the next committee in order to report to the NSAB/NSCB.
  - ACTION: Nicola Ryan, Gail Colley-Bontoft and Amanda Callow to co-ordinate an assurance report for the next committee.

TRANSFORMING CARE: A NATIONAL RESPONSE TO WINTERBOURNE VIEW HOSPITAL
Charlotte Tyler gave background to the national drive to move people with learning disabilities into the community and on the introduction of Care and Treatment Reviews (CTRs). Initially good progress had been made but gaps in the provision in community and social care was evident. Nottinghamshire had recently been identified as a ‘fast track’ site that attracted additional funding and a plan had been submitted enabling £1.7m of additional funding to be drawn down to increase the amount of support given. CCGs would be required to match this funding.

The ‘blue light’ process for emergency admissions was discussed and Charlotte had asked NHS England whether the CCGs’ role could be delegated to Nottinghamshire Healthcare Trust as specialists in this area. The Chair reported that the Mid Notts CCGs had revised their on-call process in part to accommodate this and considered that CCG input into the ‘blue light’ process was valuable and contact would still need to be made with the CCG. A protocol was currently being drafted and would be circulated in due course. A progress update was requested for 6 months’ time.
• **ACTION:** Sue Wass to add to the forward agenda for 6 months’ time.

**IRIS PROJECT**
Val Simnett introduced a report that evaluated the IRIS project within the Mansfield and Ashfield area, which had been well received by GPs and had generated positive benefits. Discussion centred on what more could be done to encourage take up of the programme and Elaine Moss agreed to raise it again at the Newark and Sherwood CCG governing body. It was agreed that an update on how the project was faring in the south of the county would be helpful.

• **ACTION:** Nicola Bramhall to update the committee on the implementation of the IRIS project in the south CCGs at the next committee

**MIDWIFERY/HEALTH VISITOR COMUNICATION**
Val Simnett reported that serious case reviews had highlighted the importance of a seamless transfer of care and communication between midwifery and health visitor services. A number of essential standards for assurance had been drafted for organisations that provide these services to adhere to. It was agreed that these quality assurance standards should be written into contracts going forward and for CCGs to present the standards at their relevant quality and performance meetings. Val Simnett would take this forward.

**JOINT ACTION PLAN UPDATE: TRANSITION (SG/15/97)**
Gary Eves updated the committee on progress. The report outlined existing arrangements and resources and contained a number of recommendations for the health community to consider. Two areas of action had been agreed focusing on maternity and Family Nurse Partnerships and the transition from CAMHS to adult mental health services. A third area had not yet been finalised and in discussion the Committee agreed that it should focus on children with long term conditions, such as Autism or ADHD, with eligibility for support changing from child to adult designation. Gary would revise the paper and circulate it to the Committee.

• **ACTION:** Gary Eves to update the transition report and circulate it to the Committee.

**ASSURANCE (SG/15/60)**

**COMBINED ADULT/CHILDREN RISK REGISTER**

**SG Combined 1:** It was agreed that Childrens continuing healthcare remained a risk as the backlog of cases had not yet been cleared. It was also noted that the CCG would need to be assured of the clinical effectiveness of the agreed packages.

• **ACTION:** Nicola Bramhall to update the next committee on how the CCGs are gaining assurance of the clinical effectiveness of the care packages.

**SG Combined 2:** The committee agreed that the risk score was correct but that clarity was required on the CCGs’ role in gaining assurance from GP surgeries and other providers on their PREVENT training plans

• **ACTION:** Nichola Bramhall to update the risk for the next committee meeting.

**SG Combined 3:** Charlotte Tyler to update for the next committee meeting on provision for individuals with learning disabilities in light of the submission of the funding plan.
LOCAL/NATIONAL UPDATES (SG/15/99)

MASH
The MASH operational report was noted. Val Simnett reported that the low staffing levels were a temporary situation following a combination of staff vacancies, annual leave and increased call volumes, and no on-going problem was anticipated.

SAFEGUARDING FORUM
Val Simnett reported that the NHS England Forum was currently revising its terms of reference to include North Midlands representation.

ACTION: Val Simnett to provide a briefing paper of key issues raised at the Forum for future committees.

ADMINISTRATION (SG/15/100)

TERMS OF REFERENCE
With the inclusion of the Deputy Chief Nurse of Bassetlaw CCG, the Terms of Reference were approved.

FUTURE MEETINGS
The Chair proposed that a facilitated development session should be held in January to consider the future format of the committee and identify 2-3 key pieces of work to take forward during 2016. The proposed dates of the 2016 committees were noted.

CHILDREN’S SAFEGUARDING AGENDA

DECLARATIONS OF INTEREST (SG/15/105)
No declarations of interest were made in relation to the agenda.

MINUTES OF CHILDRENS SAFEGUARDING MEETING 10 JULY (SG/15/106)
The minutes were agreed as an accurate record of the meeting.

MATTERS ARISING (SG/15/106)
The following actions arising from the previous meeting were noted:

- **CS/14/78 FAMILY NURSE PARTNERSHIPS**: Gary Eves presented a paper on the current position and risks on the transfer of health visiting and Family Nurse Partnership from NHS England to local authorities, to take place in October. Work continued to ensure a smooth transfer and would be meeting with Val Simnett to examine any health safeguarding risks associated with it. An update would be given at the next meeting.
  
  ACTION: Sue Wass to circulate the update with the minutes.

- **CS/14/80**: CAMHS Tier 4 Provision: will be presented at the next meeting. The item was covered under Local updates. Action closed.

- **SG/15/33 Child Sexual Exploitation**: Gary Eves reported on four workstreams that had been established, with Gary leading on recovery. Plans were to use the toolkit to
support the work and he would be taking forward work with Val Simnett and Cathy Burke. Action closed.

All other actions had been completed.

LOCAL UPATES (SG/15/107)

NSCB ANNUAL REPORT
The report was noted.

LOCAL TRANSFORMATION PLANS FOR CHILDREN AND YOUNG PEOPLE’S MENTAL HEALTH AND WELLBEING
Gary Eves updated the committee on the development of plans to implement the recommendations of the ‘Future in Mind’ report, which aimed to transform CAMHS services. Investment plans now required restructuring following the announcement in August of a reduction in the budget for the programme. The plan required sign off by Mansfield and Ashfield CCG as lead CCG and by the Health and Wellbeing Board by 16th October. A programme lead had been secured on a 12 month contract.

- ACTION: Gary Eves to provide a report on the high level plan and key objectives to the next Committee, which would then be presented to CCG governing bodies.

ASSURANCE (SG/15/108)

CHILDREN RISK REGISTER

SG Children 1&2 Combined: Gary Eves had updated the risk, with a proposal that the score remained as 12. NHS England would commence a procurement exercise to address the national shortage of tier 4 beds and redistribute beds. A Nottinghamshire CAMHS crisis response was expected to go live in quarter 4. Dr Walker noted the risk of a potential lack of capacity of trained professionals to staff new units.

SG Children 3: It was agreed that this was no longer a risk, but to continue to seek on-going engagement from GPs in the south of the county. Risk removed.

SG Children 4: It was agreed that the risk remained the same and would be updated for the next committee.

- ACTION: Chief Nurses of all CCGs to update for the next committee.

SG Children 5: It was agreed that this was no longer a risk and the risk was agreed as closed.

SG Children 6: The new risk was noted.

AGREEMENT OF KEY MESSAGES FOR FEEDBACK TO GOVERNING BODIES (SG/15/112)
Key messages were the submission for Transforming Care and the need to encourage GP take up of the IRIS project.

The next meeting will be held on Monday 16 November 2015, 1pm, Meeting Room 3, Birch House.