NHS Nottingham North and East Clinical Commissioning Group

Meeting Title	NHS Nottingham North and East CCG Governing Body	Date: 19 September 2017 Agenda Item: NNE/GB/140		
Paper Title	Highlight Report from the Open Session of the Nottinghamshire Safeguarding Committee meeting held on 7 th June 2017			
Lead Director Report Author	Nichola Bramhall, Director of Nursing and Q Click here to enter text.	uality		
Purpose (tick o only)	one Approval 🗆 Acknowledge/ Note	☑ Review □ For Information □		
	 ensure leads and timescales were ident committee will approve the revised version relation to the Sexual Abuse Referral Section to the Sexual Abuse Referral Section to the Sexual Abuse Referral Section 15 July 2017 until 31 March service from 15 July 2017 until 31 March service is commissioned by NHSE (due previous unsuccessful procurement it was would be reworded. The SOWG will commisk needs to be added in relation to the Safeguarding Hub (MASH)- whilst this the MASH the fact that CCG staff have I impacted their ability to undertake other 360 Assurance Internal Audit Report plan was provided showing actions com Youth Offending Team Public Protect informal feedback given very positive withis area. The report will be presented in this area. The report will be presented in Cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation due to la DNAR status. The CCG Quality Teams and mapping forums where this issue cardiopulmonary Resuscitation for the Size CCGs' approach to commissioning a rewill now be considered for South Notting 	I therefore follow. Key highlights from the reviewed, it was agreed that the up (SOWG) would do some further work to ified for all risks/ mitigating actions and the ion virtually post meeting. A new risk in Service (SARC) was proposed, however led from a meeting held earlier in the day rating model and funding with NUH for the n 2018 as an interim until the new regional to commence on 1 April 2018). Given the as agreed that this risk would remain but usider at their next meeting whether or not a staffing issues in the Multi- Agency has not impacted on the performance of had to provide cover may have adversely duties. Action Plan - progress against the action plete or on track. tion Inspection- formal report awaited but th only a couple of areas for improvement. are Annual Report 2016/17 - g good assurance in relation to progress in n full to Governing Bodies.		

 events had been held to support the Truth Project. The information leaflet developed for survivors has received positive feedback. Safeguarding Adults Training Needs Analysis- this has been updated to reflect the latest Nottinghamshire Safeguarding Adults Board (NSAB) competency framework. The SOWG will now prepare a template for a regular report on both adults' and children's safeguarding training compliance Countywide for the Committee to receive quarterly. Safeguarding Supervision Strategy and Guidance- this has been developed for adoption Countywide. It was agreed that the SOWG would consider how this is shared with providers and included in quality schedules in future. The committee felt that given financial pressures in provider organisations it is important that we seek assurance that supervision is not being adversely impacted. Named Doctor Options Update- it was confirmed that the plan to transfer this function from named doctors in the acute trusts to a named professional working across the CCGs with support from Named GPs was still the proposed way forward but that the timescale for implementation has been deferred to April 2018 to align with changes to SARC provision, to enable recruitment and to enable negotiation of termination of contracts and withdrawal of funding.
ALERT
 Learning Disability Mortality Review Programme- an update was provided in relation to nomination of CCG contacts (Adult Safeguarding Leads) and planned training for reviewers. Concerns were raised about the potential lack of capacity within CCGs to deliver this additional work given no additional resources. It was also agreed that the steering group should consider the potential impact on providers who may be required to input and how information about this programme is communicated. Safeguarding Assurance Tool Pilot- feedback was provided on early experience of using this tool. Whilst potential benefits could be seen, if there is agreement that this replicates other assurance processes, there were some concerns about how time consuming use of this tool is. It was agreed that the SOWG would write up an evaluation so that this could be fed back to NHSE during the pilot to influence future use and development. MASH- a paper was presented in response to a request from the NSAB for MASH health staff to have access to patients' GP records. Consideration had been given to this request but it was felt not to be appropriate for a number of reasons (consent/ capacity/ access being to whole record not relevant sections only therefore not in line with Caldicott principles/ this would require MASH health staff to interpret complex information that they may not be best placed to do). It was agreed that the current process of contacting GPs for information should continue as this had not presented any issues to date and resolved issues in relation to proportionality of access. It was however agreed that further work should be done to support GPs in understanding consent requirements and making it easy for them to document discussions. Review of Improving Access to Psychological Therapies (IAPT) for Survivors of Sexual Violence/ Non Recent Abuse- in response to concerns raised by the Equinox Senior Management Group about the CCGs' decision not to commission bespoke IAPT serv
commissioned services are not effective has been undertaken. Consideration has also been given to the wishes of survivors and experiences from elsewhere. In conclusion the CCGs have upheld the decision not to commission bespoke services but will undertake further work (with Public Health Commissioners) to monitor the quality of providers and will ensure that patients and clinicians are
aware of the services available and how to request bespoke services if required.
Ratified minutes from the open session of the meeting held on 25 April 2017 are also

		I for information (a contemporaneous highlight report has previously been provided to erning Body).						
Implications: (please tick where relevant)								
Integration			Patient Choice					
Reducing inequality			Patient & Public Involvement					
Constitution		\boxtimes	Quality of Services	\boxtimes				
Governance		\boxtimes	QIPP					
Innovation			Research					
Learning and Development			Sustainability					
	Finance checked by: N/A							
Appendices N/A								
Appendices								
Report Histo	ory	The Nottinghamshire Safeguarding Committee Highlight Report and minutes are standing quarterly agenda items.						
Recommend	dation	The Governing Body is asked to: NOTE the contents of the report.						