


Mansfield and Ashfield
Clinical Commissioning Group


Nottingham North and East
Clinical Commissioning Group


Newark and Sherwood
Clinical Commissioning Group


Nottingham West
Clinical Commissioning Group


Nottingham City
Clinical Commissioning Group


Rushcliffe
Clinical Commissioning Group


Bassetlaw
Clinical Commissioning Group

Safeguarding Policy (incorporating PREVENT and Safeguarding Training Strategy

2018-2021

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CONTROL RECORD			
Reference Number N&N QUAL-001	Version 1.0	Status Final	Author Designated Safeguarding Nurse
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			Team Safeguarding
Title	Safeguarding Policy (incorporating PREVENT and Safeguarding Training Strategy)		
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Superseded Documents	Adopted from original Version 4.3 of the policy of the same name		
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<p>This is a controlled document and whilst this policy may be printed, the electronic version available on the CCGs' document management system is the only true copy. As a controlled document, this document should not be saved onto local or network drives.</p>			

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1. Introduction

The framework for CCGs safeguarding responsibilities

- 1.1 This policy applies to the Nottinghamshire Clinical Commissioning Groups which fall within Nottinghamshire and Nottingham City Local Authority Areas, (subsequently referred to as the CCGs). They include:
- Mid Nottinghamshire (including Mansfield and Ashfield CCG and Newark and Sherwood CCG);
 - Greater Nottingham (including Nottingham City CCG, Nottingham North and East CCG, Nottingham West CCG and Rushcliffe CCG); and
 - Bassetlaw (including Bassetlaw CCG).
- 1.2 This policy describes how the CCGs discharge their safeguarding responsibilities for commissioning health services. It should be read in conjunction with:
- Memorandum of Understanding for Transfer of Commissioning Functions (Aug 2012);
 - CCG Safeguarding Strategy 2018; and
 - Nottinghamshire and Nottingham City Safeguarding Children Board and Nottinghamshire and Nottingham City Safeguarding Adult Board Policies and Procedures.
- 1.3 This policy outlines how the CCGs fulfil their statutory duties to safeguard adults with care and support needs and children. It complements the NHS Nottinghamshire “Safeguarding Strategy” 2018 and incorporates Nottinghamshire CCGs PREVENT strategy (Appendix 2) Nottinghamshire CCGs Safeguarding Training Strategy and Matrix (Appendices 3 and 4) and Nottinghamshire CCGs Safeguarding Supervision Strategy (Appendix 5) and is underpinned by legislation and best practice guidance, including amongst others:
- The Children Act 1989 & 2004.
 - The Care Act 2014.
 - Working Together to Safeguard Children 2018.
 - The Sexual Offences Act 2003.
 - Common Core Skills and Knowledge Framework for the Children’s Workforce Intercollegiate Document: Roles and Competencies for Health Care Staff 2015.
 - Government’s Prevent Strategy: Guidance for Healthcare Workers.
 - The Mental Capacity Act 2005.

- Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework 2015 NHS England.
- Care Quality Commission Fundamental Standards.
- CONTEST: The United Kingdom’s Strategy for Countering Terrorism, June 2018.
- Promoting the Health and Wellbeing of Looked After Children 2015.

2. Purpose

2.1 The purpose of this policy is to:

- Promote the safety and welfare of children and adults with care and support needs across all commissioned and contracted services and to ensure their voices are taken into account.
- Promote a “think family” approach to promote connectivity between the commissioning of adult and children’s services.
- To clarify safeguarding responsibilities of staff at all levels including contracted staff.

3. Scope / Audience

3.1 This policy applies to all employees and appointees of the CCGs and others working within the organisation in a temporary capacity. These are collectively referred to as ‘individuals’ hereafter.

4. Definitions

4.1. Children and young people are defined in law as up to the age of 18 years.

4.2. Safeguarding duties apply to adults who:

- Have needs for care and support (whether or not the local authority is meeting any of those needs).
- Is experiencing, or at risk of, abuse or neglect.
- As a result of those care and support needs is unable to protect themselves from either the risk of or the experience of abuse and neglect (as defined in Care Act 2014).

5. Roles and Responsibilities

5.1 How CCGs take responsibility for safeguarding children and adults with care and support needs

Clinical Commissioning Groups:

- a) Will identify an Executive Governing Body lead for safeguarding children young people and adults with care and support needs, to listen to their views and promote their needs across service planning and delivery.
- b) Will comply with S10 and S11 of the Children Act 2004 and S42-46 of the Care Act 2014 and any subsequent statutory guidance relating to vulnerable groups.
- c) Will contribute to the effective functioning of the Local Safeguarding Children Boards and the Safeguarding Adults Board or any safeguarding partnership arrangements which become effective subsequently as a result of national policy or legislation.
- d) Will promote the commissioning of services which prioritise the safety and welfare of children and adults with care and support needs through local partnership arrangements and discharge their functions having regard to the need to safeguard and promote the welfare of vulnerable individuals.
- e) Will promote the planning and provision of a range of safeguarding training to enable staff to recognise and report safeguarding issues. The CCGs will identify leads for the following functions:
 - Governing Body lead for safeguarding children and adults.
 - Named Senior Officer for Allegations against Staff who will inform the Local Authority of any allegations and concerns of abuse made against an employee, agency worker, volunteer or contracted staff as per Local Safeguarding Children Board and Local Safeguarding Adult Board (LSCB and LSAB) procedures.
 - Lead for Multi-Agency Public Protection Arrangements (MAPPA) *(this role is undertaken by the Executive Leads for Mid Notts CCGs on behalf of the Nottinghamshire CCGs).*
 - Lead for PREVENT the Government counter terrorist strategy *(this role is undertaken by the Executive Lead for Greater Notts CCGs on behalf of the Nottinghamshire CCGs).*
 - Designated Senior Manager Safeguarding Adults.
 - Lead for the Mental Capacity Act.
 - Designated Nurse and Doctor for Safeguarding Children.

- Designated Nurse and Doctor for Looked after Children.
- Designated Paediatrician for Unexpected Child Deaths.

5.2 How the CCGs monitor safeguarding quality and performance of provider organisations

As part of their quality monitoring and scrutiny role, CCGs will monitor the following across all organisations/services for which they have a commissioning role:

- f) Provider organisations have Named Professionals Safeguarding Children/Safeguarding Adult Leads in place to take lead responsibility for safeguarding and who report to the CCGs Designated Professionals as outlined in “Working Together 2018”.
- g) Safe recruitment policies are in place as set out in six NHS standards of recruitment which include recommendations relating to relevant checks with the Disclosure and Barring Scheme.
- h) Comprehensive and effective single and multi-agency policies and procedures to safeguard children, looked after children, and adults with care and support needs are in place, which are in line with Local Safeguarding Board (Adult and Children) policies and procedures.
- i) Comprehensive and effective staff training and supervision policies in place which equip staff with core competencies to recognise and respond to children and adults at risk of abuse neglect and exploitation.
- j) Compliance with Care Quality Commission Fundamental Standards.
- k) Co-operation and compliance with performance indicators and inspections required by Local Safeguarding Children Board (LSCB), the Local Safeguarding Adult Board (LSAB) and by any other national regulatory bodies, such as the Care Quality Commission, Ofsted or Monitor.
- l) Compliance with the Government PREVENT anti-terrorist strategy and Counter Terrorism Act 2015.
- m) Compliance with the Mental Capacity Act and deprivation of liberty safeguards.
- n) Effective incident reporting which links to LSCB and LSAB serious case review processes where appropriate.
- o) Lessons learned from serious incidents, individual management reviews or serious incidents inform practice and result in improved outcomes.
- p) Service specifications which promote quality standards around the safety and welfare of children and adults with care and support needs including a

“think family” approach between children and adult services and compliance with the “dignity in care” initiative.

- q) Providers offering residential care under Section 85/86 of the Children Act 1989 for children and young people have appropriate standards in place and a policy to inform the Local Authority if a child is resident in hospital or hospice care.
- r) Providers of mental health in-patient care have policies to inform NHS England if children under 18 are housed in the same wards as adults, to ensure that they are transferred to more suitable accommodation within 48 hours, and have an appropriate policy regarding children visiting in-patients onwards.

Roles	Responsibilities
Chief Nurse (CCG Governing Body Executive Leads for Safeguarding)	<ul style="list-style-type: none"> • Is the overall lead officer for Safeguarding for the CCGs within their portfolio of responsibility. • Represents the CCGs on Nottinghamshire Strategic Safeguarding Partnership Groups including although not exclusively: <ul style="list-style-type: none"> • Safeguarding Children; • Safeguarding Adults; • Domestic and Sexual Abuse Executive; • MAPPA Strategic Management Boards. • Reports to the Chief Officer and/or the CCGs Governing Bodies on issues in relation to changes in strategic direction, significant developments, learning from serious incidents or identified risks in relation to safeguarding children or adults. • Responsible for the execution of all safeguarding responsibilities on the behalf of the Chief Operating Officers and the Governing Bodies within their respective areas. • Responsible for the roles outlined in Section 5 of this document or for delegating as appropriate. • Promote the safeguarding of children and adults with care and support needs within commissioning arrangements to meet identified quality standards through quality scrutiny processes. • Commission and sign off Individual Management Reviews for serious case reviews or Domestic Homicide Reviews and ensure attendance at relevant multi-agency panels in

Roles	Responsibilities
	<p>relation to these.</p> <ul style="list-style-type: none"> • Monitor the progress of recommendations and outcomes from Serious Untoward Incidents, Individual Management Reviews, Serious Case Reviews and Domestic Homicide Reviews. • Oversee the performance management of the Designated Professionals and Safeguarding Adult Leads. • Commission safeguarding annual reports on behalf of the CCGs' Governing Bodies. • Ensure providers and contracted services are aware of their responsibilities in relation to reporting safeguarding incidents.
<p>CCG Governing Body Members (executive and non-executive)</p>	<ul style="list-style-type: none"> • Maintain a continued awareness of current safeguarding issues and CCGs' responsibilities/accountability. • Maintain a knowledge base through mandatory training, reviewing reports, newsletters and updates. • Promote the welfare of children and adults with care and support needs in both personal and CCG activity and comply with all organisational and LSCB and LSAB multi-agency policies and procedures. • Consider the requirement of safeguarding in all activities both professionally and personally, in particular through contracting and performance monitoring.
<p>Designated and Associate Designated Nurses and Doctors for Safeguarding Children and Safeguarding Adult Leads</p>	<ul style="list-style-type: none"> • Are identified within the health economy as clinical leads with statutory roles and responsibilities for safeguarding children. Are appropriately trained and given sufficient time to carry out their duties effectively. • Take a strategic, professional advisory lead on all aspects of the health service contribution to safeguarding across the CCG area, which includes all providers. • Advise on the planning and delivery of an organisational programme of safeguarding training which includes the Mental Capacity Act and PREVENT. • Provide clinical advice on the development and monitoring of the safeguarding aspects of CCG contracts. • Provide supervision, advice and support to the named professionals and safeguarding leads in provider organisations. • Provide expert professional advice on matters relating to

Roles	Responsibilities
	<p>safeguarding to other professionals, the CCGs, Local Authorities, the Local Safeguarding Boards and associated sub-committees and partner agencies.</p> <ul style="list-style-type: none"> • Advise on serious incidents or individual management reviews which arise as part of the Safeguarding Children Practice Review, Safeguarding Adult Review or Domestic Homicide Review Process, and monitor specific health implementation and outcomes of agreed actions. • Advise on the development of organisational and multi-agency strategy, policy procedures, audits and projects relating to safeguarding children and adults. • Attend the LSCB, LSAB and relevant sub-committees in a professional advisory capacity for the CCGs and communicate positively CCG values and strategic vision to stakeholders and partners as appropriate. • Alert the CCGs to situations which compromise organisational ability to discharge safeguarding responsibilities. • To challenge decisions in the multi-agency arena, where children or adults with care and support needs are believed to remain at risk via escalation processes outlined in local procedures. • Responsible for planning and undertaking quality assurance processes to include visits to care settings and review of investigations and outcomes following serious incidents. • The Designated Nurse Safeguarding Children (County) is responsible for the operational management and performance monitoring of the Multi-agency Safeguarding Hub Health Team. • Produce an Annual Report on Safeguarding.
Named GP/ Professional for Safeguarding	<ul style="list-style-type: none"> • Will support all activities necessary to ensure that the organisation meets its responsibilities to safeguard/protect children and adults with care and support needs. • To work as a member of the organisation's Safeguarding Team. • To participate in multi-agency subgroups of the local safeguarding partnership arrangements and the employing organisation safeguarding governance groups.

Roles	Responsibilities
	<ul style="list-style-type: none"> • Advise local police, children’s social care and other statutory and voluntary agencies on health matters with regard to safeguarding. • Contribute to the planning and strategic organisation of safeguarding services. • Work with other specialist safeguarding professionals on planning and implementing a strategy for safeguarding. • Ensure advice is available to the full range of specialties within the organisation on the management of safeguarding concerns. • Assess and evaluate evidence, write reports and present information to relevant meetings. • Work closely with other specialist safeguarding professionals across the health community. • Work closely with safeguarding leads from other agencies, such as Education and Children’s Social Care. • Contribute to the production, dissemination and implementation of organisational safeguarding policies and procedures. • Encourage case discussion, reflective practice, and the monitoring of significant events at a local level. • Contribute to monitoring the quality and effectiveness of services, including monitoring performance against indicators and standards. • Disseminate lessons learnt from serious case management reviews, and advise on the implementation of recommendations.
Designated Nurse and Doctor Looked After Children	<ul style="list-style-type: none"> • Provide specialist knowledge in all aspects relating to looked after children across the Nottingham City and County (including Bassetlaw) health economy. • Provide strategic and clinical leadership to the service and to the Specialist Children in Care Health Teams, ensuring that NHS Nottinghamshire fulfils its statutory duties for Looked after Children and care leavers. • Work closely with health providers and the commissioners of the services to ensure processes are in place for the effective delivery of statutory health assessment reviews to an acceptable quality standard. Have oversight of the performance of commissioned CIC health providers.

Roles	Responsibilities
	<ul style="list-style-type: none"> • Work closely with Nottinghamshire County and City Children and Young People’s Social Cares Services to promote an integrated care approach in the best interests of Looked after Children and care leavers. • Ensure the Corporate Parenting Board is aware of the health needs of their looked after population and the effectiveness of the services commissioned to provide this support via the Corporate Parenting Board meetings. • Promote integrated working with Child and Adolescent Mental Health Services (CAMHS) Looked after Children teams to advance emotional health and wellbeing outcomes for children in care. • Engage with public health colleagues to ensure that service development is evidence based and that Looked after Children and care leavers are considered across the health economy. • Report to and provide specialist knowledge to commissioners. • Work in partnership with Designated and Named safeguarding colleagues to ensure Looked after Children and care leavers are safeguarded. • Provide specialist knowledge advice and leadership to CCGs in all aspects relating to Looked after Children and care leavers. • Work with Nottingham City and County Children in Care Councils ensuring the voice of the child is captured when designing services.
Designated Paediatrician for Unexpected Child Deaths	<ul style="list-style-type: none"> • Undertakes lead responsibility for medical responses to unexpected deaths of children which occur within an identified area. • Oversee and contribute to a rota to provide a “rapid response” to unexpected child deaths. • Work with the Police and Children’s Social Care to co-ordinate responses to unexpected child deaths. • In partnership with the Police and Children’s Social Care, undertake appropriate investigations and enquiries and evaluate the reasons and circumstances of the death in agreement with the Coroner. • Liaise with those who have on-going responsibility for other

Roles	Responsibilities
	<p>family members providing support to the bereaved family, and where appropriate referring on to specialist bereavement services following the death.</p> <ul style="list-style-type: none"> • Maintaining contact at regular intervals with family members and professionals who have on-going responsibilities for family members, to keep them up-to-date with information about the child's death. • Act as clinical medical advisor as a member of the LSCB Child Death Overview Panel.
<p>CCG Quality Assurance Manager (this title may vary between CCGs)</p>	<ul style="list-style-type: none"> • Work in close partnership with the CCG Safeguarding Children and Adult Leads. • Must maintain a continued awareness of safeguarding issues and CCG responsibilities/accountability, and maintain a knowledge base by reviewing reports, newsletters and attending training/development sessions. • Monitor that all commissioned services have robust policies and procedures embedded to safeguard and promote the welfare of children and adults with care and support needs which are in accordance with the LSCB and LSAB Procedures (see section 5.2 around monitoring standards). • Promote the safeguarding and welfare of children and adults with care and support needs in all activities related to their role. <p>Inform the CCG Safeguarding Lead of any deficits in health services which may impact on inter-agency working, and potentially put vulnerable people at risk.</p>
<p>Employees (including contracted staff)</p>	<ul style="list-style-type: none"> • Comply with all CCG and LSCB and LSAB policies procedures and guidance on safeguarding children and adults with care and support needs. • Attend safeguarding training at the appropriate level to their role as outlined in the CCGs Safeguarding Training Strategy (Appendix 3) and maintain a level of knowledge and skills appropriate to their role. • Protect adults and children at risk by recognising and responding to abuse and neglect, and know what action to take to make appropriate referrals, and where appropriate contribute to multi-agency activity as per LSCB and LSAB procedures.

Roles	Responsibilities
	<ul style="list-style-type: none"> • Access safeguarding advice and supervision at the appropriate level for their role as outlined in the Intercollegiate Document: Safeguarding Roles and Competencies for Health Care Staff 2014. • Take part in surveys, audits and evaluations regarding safeguarding as appropriate. • Take immediate and appropriate action regarding allegations against people who work with children as outlined in the CCG Raising Concerns (Whistleblowing) policy. • Seek advice from Designated Professionals or Safeguarding Adult Leads where they are unhappy with a response to a child or adult at risk as outlined in the LSCB and LSAB escalation procedures. • Comply with safe recruitment of staff in line with HR processes.
<p>Governance Arrangements (See Appendix 6 for Safeguarding Governance structures)</p>	<ul style="list-style-type: none"> • A memorandum of understanding is in place which describes the statutory relationship between the CCGs. • Appendix 6 demonstrates the safeguarding governance arrangements for adults and children. The Safeguarding Assurance Group will report to the Chief Nurses who in turn will report to individual CCG Quality Committees and Governing Bodies. Issues reported and monitored will include: - <ul style="list-style-type: none"> ➢ Safeguarding policy and procedure monitoring and ratification. ➢ Performance and quality monitoring of providers around safeguarding. ➢ Monitoring of safeguarding governance arrangements. ➢ Feedback from safeguarding meetings eg. NSCB, NSAB, NHS England Safeguarding Network. ➢ Looked After Children. ➢ Domestic and sexual violence. ➢ Multi-agency Public Protection Arrangements (MAPPA). ➢ PREVENT arrangements. ➢ New documents, legislation and research in safeguarding. ➢ Serious incidents and reviews and subsequent learning and improvement.

Roles	Responsibilities
	<ul style="list-style-type: none"> ➤ Identified risks in relation to safeguarding. ➤ Female Genital Mutilation. ➤ Child Sexual Exploitation. ➤ Modern slavery and human trafficking. • Terms of Reference for the Safeguarding Assurance Group and the Nottinghamshire CCG Strategic Safeguarding Group will be agreed and reviewed regularly and these will reflect a clear line of reporting and governance arrangements. • CCG Governing Bodies will receive as a minimum: <ul style="list-style-type: none"> ➤ An Annual Report relating to Safeguarding and Looked After Children. ➤ Reports and papers regarding any specific issues requiring Governing Bodies' approval or decision.

6. Equality and Diversity Statement

- 6.1 The Nottingham and Nottinghamshire CCGs pay due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation, both as commissioners and as employers.
- 6.2 As a commissioning organisation, we are committed to ensuring our activities do not unlawfully discriminate on the grounds of any of the protected characteristics defined by the Equality Act, which are age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 6.3 We are committed to ensuring that our commissioning activities also consider the disadvantages that some people in our diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, gypsies, roma and travellers.
- 6.4 As employers, we are committed to promoting equality of opportunity in recruitment, training and career progression and to valuing and increasing diversity within our workforce.
- 6.5 To help ensure that these commitments are embedded in our day-to-day working practices, an Equality Impact Assessment has been completed for, and is attached to, this policy.

7. Communication, Monitoring and Review

- 7.1 This policy will be subject to regular review and revisions will be made when a significant national guidance advocates a review. If revised, all stakeholders will be alerted to the new version.
- 7.2 This policy is issued and maintained by the CCGs' Quality and Governance Directorate (or CCG equivalent) on behalf of all stakeholders.
- 7.3 Any individual who has queries regarding the content of this policy, or has difficulty understanding how this policy relates to their role, should contact the 'Document owner'.

8. Staff Training

- 8.1 See Appendix 3: CCG Safeguarding Training Strategy; and Appendix 4: Mandatory Training Matrix.

9. References and Bibliography (including other CCG Policies)

CCG Strategies, Policies, Procedures and Practice Guidance

- CCG Safeguarding Strategy 2015.
- Nottinghamshire and Nottingham City Safeguarding Children Board Procedures.
- Nottinghamshire and Nottingham City Safeguarding Adult Policy and Procedures.
- Nottinghamshire Multi-Agency Public Protection Arrangements Guidance CCGs PREVENT Strategy 2015.
- CCG Policy and Procedure for Managing Allegations and Concerns that an Employee or Those Who Act in the Capacity of Employees may be Harming a Child, Young Person or an Adult in Need of Safeguarding 2018.
- HM Government (2016) Multi-agency statutory responsibilities to safeguard women and girls against FGM.
- NHS England (March 2018) Commissioning services to meet the needs of Women and Girls with FGM guidance.

HM Government: 2018, Working Together to Safeguard Children	HMSO London
HM Government; The Children Act 1989,	HMSO London
HM Government; The Sexual Offences Act 2003	HMSO London
HM Government: The Children Act 2004	HMSO London

HM Government: The Care Act 2014	HMSO London
Intercollegiate Document 2014: Roles and Competencies for Health Care Staff	RCPCH
HM Government: The Mental Capacity Act 2005	HMSO London
NHS England: Safeguarding Vulnerable People in the Reformed NHS Accountability and Assurance Framework 2015	

10. Equality Impact Assessment for Safeguarding Policy

Date of assessment:	September 2019			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Age ¹	No	n/a	n/a	n/a
Disability ²	No	n/a	n/a	n/a
Gender reassignment ³	No	n/a	n/a	n/a
Marriage and civil partnership ⁴	No	n/a	n/a	n/a
Pregnancy and maternity ⁵	No	n/a	n/a	n/a
Race ⁶	No	n/a	n/a	n/a
Religion or belief ⁷	No	n/a	n/a	n/a
Sex ⁸	No	n/a	n/a	n/a
Sexual orientation ⁹	No	n/a	n/a	n/a
Carers ¹⁰	No	n/a	n/a	n/a

¹ A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).

² A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

³ The process of transitioning from one gender to another.

⁴ Marriage is a union between a man and a woman or between a same-sex couple.

Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.

⁵ Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

⁶ Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

⁷ Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

⁸ A man or a woman.

⁹ Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none. <https://www.equalityhumanrights.com/en/equality-act/protected-characteristics>

¹⁰ Individuals within the CCGs which may have carer responsibilities.

Appendix 1

What to do if you are worried about the safety of a child or adult with care and support needs

If someone is in danger and in immediate need of safety and protection ring the police or emergency services as appropriate on **999**.

If you have general concerns around the safety or welfare of a child or adult with care and support needs, follow the local Safeguarding Children and Adult Procedures by following the links below and seek advice as necessary from your line manager. Additional advice is available if needed from the CCGs' Safeguarding Adult and Children Leads, who are located within the Quality Governance and Patient Safety Directorate of the CCGs (see Appendix 7).

If you have concerns that a child or vulnerable adult is being abused, contact as below: -

Nottinghamshire County

Call Nottinghamshire Multi-Agency Safeguarding Hub (MASH) on **0300 500 8090** during the following hours:

8.30 am - 5.00 pm - Monday to Thursday

8.30 am - 4.30 pm - Friday

To submit an on line concern form, log onto:

www.nottinghamshire.gov.uk/MASH in an emergency, outside of these hours contact:

Emergency Duty Team (EDT) on **0300 456 4546**.

Nottingham City

Children

Phone Nottingham City Children and Families Direct on **0115 876 4800** during the following hours 8.30 am - 5.00 pm Monday to Friday.

To submit a concerns form email (from NHS.net):

candf.direct@nottinghamcity.gcsx.gov.uk

If you have concerns outside of working hours contact the Emergency Duty Team on **0115 876 4800**.

Adults - Nottingham City Health and Care Point on **0300 131 0300** Option 2 during the following hours: Monday to Friday 9.00am - 5.00 pm.

Secure mail (from NHS.net) adult.contactteam@nottinghamcity.gcsx.gov.uk

Emergency safeguarding concerns outside of hours call **0115 8761000**.

Always discuss any referrals with your line manager and keep a written copy of your referral.

Appendix 2

PREVENT Strategy

Building Partnerships, Staying Safe - The health sector contribution to HM Government's Prevent strategy: Guidance for Healthcare Workers

Background - Implications for the NHS

As part of the Government's Counter Terrorism Strategy (CONTEST) which was revised in March 2015, NHS England has committed to support initiatives to reduce the risk of terrorism. Nottinghamshire Clinical Commissioning Groups are committed to ensuring vulnerable individuals are safeguarded from supporting terrorism or becoming terrorists themselves as part of the Home Office counter-terrorism strategy *Prevent*.

CONTEST aims to reduce the risk from terrorism so that people can go about their lives freely and with confidence. It is made up of four work streams, or four Ps:

Prevent – (see below).

Protect – Strengthening our borders, infrastructure, buildings and public spaces.

Prepare – Where an attack cannot be stopped, to reduce its impact.

Pursue – To disrupt or stop terrorist attacks.

The first P is ***Prevent*** which aims to stop people becoming radicalised or supporting extremist and terrorist organisations. It has been described as “the only long term solution” to the genuine threat we currently face from terrorism. The *Prevent* strategy will specifically focus on three broad objectives:

- Tackle the causes of radicalisation and respond to the ideological challenge of terrorism.
- Safeguard and support those most at risk of radicalisation through early intervention, identifying them and offering support.
- Enable those who have already engaged in terrorism to disengage and rehabilitate.

It is known that individuals who are most likely to engage in extremist activities have vulnerabilities which often, as a result, put them into contact with health staff.

The *Prevent* strategy places an onus upon the health sector to support the work of counter-terrorist activity because of the volume of people who come into contact with healthcare workers on a daily basis and high profile cases associated with the NHS.

Prevent delivery for each provider organisation is now included within the NHS Standard Contract within Service Condition.

The rollout of the revised *Prevent* strategy intends to improve channels of communication across the public sector and other partners in order to counter-terrorism in the UK mainland and its interests abroad.

Healthcare workers have the potential to:

- Prevent someone from being radicalised and or supporting terrorism as it is substantially comparable to safeguarding in other areas.
- To receive information that allows them to correctly identify signs that someone has been or is being radicalised.
- Identify people who could be considered “at risk” - need to be aware of the support which is available and be confident in referring people for support.
- Meet and treat people who are vulnerable to radicalisation.

Implications for NHS Provider Services

Provider organisations must include *Prevent* in policies and procedures and comply with the principles contained in *Prevent* and the *Prevent* Guidance and Toolkit which include:

- Nominating a *Prevent* Lead.
- Provide ‘Workshops to Raise Awareness of *Prevent*’ (WRAP) for staff and increase numbers of staff being trained to identify potential risks.
- Having systems in place to record how many referrals the organisation makes to multi-agency *Prevent* Groups/Channel groups.
- Joining local networks that exist with the Local Authorities and Police to support counter- terrorism and share information.
- Being alert to the risk of attack on the Trust.
- Notifying the co-ordinating Commissioner in writing of any change to the identity of the *Prevent* Lead as soon as practicable and no later than ten operational days after the change.

The following staff groups have been identified as priority groups for training;

- Staff who predominantly work with mental health and learning disability patients.
- Staff working in emergency departments, minor injuries units and walk in centres.
- Ambulance staff.
- Staff working in chaplaincy services School Nursing Services.
- Drug and Alcohol NHS services Safeguarding Leads.

Roles and Responsibilities of the Clinical Commissioning Groups

Nottinghamshire CCGs are committed to:

- Scrutinise and quality monitor provider organisations compliance with the Prevent Strategy.
- Raising staff awareness so that they can recognise exploitation of vulnerable individuals being drawn towards terrorist-related activity.
- Ensuring staff are aware of Prevent contacts within their organisation.
- Working with partners to develop and strengthen safeguarding of vulnerable individuals.

Further Information

<https://www.gov.uk/government/policies/protecting-the-uk-against-terrorism/supporting-pages/prevent>

If you have concerns about an individual patient or member of staff who may be susceptible to radicalisation and/or violent extremism or suspect of being engaged in terrorist activity, please contact the Chief Nurse for Nottingham and Nottinghamshire CCGs on 0115 883 1849. You will be supported to share your concerns and the CCGs will work with partners to share information in order to reduce the risk of terrorism in Nottinghamshire.

All the package links are on the website;

- <https://www.england.nhs.uk/ourwork/safeguarding/our-work/prevent/>
- Or <https://www.e-lfh.org.uk/programmes/statutory-and-mandatory-training/>
- The adult e-learning includes information at Levels 1 and 2 on Prevent and there is also a Preventing radicalisation e-learning package for Level 2.

Appendix 3

CCG Safeguarding Training Strategy

Mandatory Safeguarding Training Strategy for Nottinghamshire CCGs

This training strategy outlines the responsibilities and commitment of the Nottingham and Nottinghamshire CCGs in discharging their functions as commissioners of health care, to ensure that all staff employed by the CCGs are competent in carrying out their responsibilities to safeguard and promote children and young people and adults with care and support needs in all areas of service provision.

Level of Training required (also see Mandatory Training Matrix at Appendix 4)

Level 1

The level required by all staff within a month of appointment as part of the organisational induction programme. This includes e-learning introduction to Safeguarding Children Level 1 and Safeguarding Adults Awareness Level A, through ESR or alternative online training module (for employees without access to ESR).

Level 2

Required by all clinical staff who have any direct contact with children, young people or adults with care and support needs and/or parents/carers in the course of their work. This includes pharmacists, patient experience teams, public engagement teams, clinical advisors, and lay members undertaking quality visits.

- Completion of Levels 1 and 2 training Safeguarding Children.
- Safeguarding Adults Levels A and B training.
- PREVENT which can be accessed through e-learning.
- Mental Capacity Act.
- Three-yearly refreshers of all of the above.

Level 3

Required by all clinical staff working with children, young people adults with care and support needs and/or their parents/carers and who could potentially contribute to assessing, planning, intervening and evaluating need or risks. This includes safeguarding leads, clinical leads and GP members.

- Levels 1 and 2 as outlined above (only need to be completed once).
- Additional multi-agency training available through Safeguarding Children and Adult Board Training Programmes.
- Evidence of annual updates at Level 3.

Level 5 (Children's specialists)

Specialist training modules as required by Designated Professionals as identified in the RCPCH Intercollegiate Document: *Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff – 2015*, including annual updates.

Bespoke training for Governing Body members, individuals with delegated safeguarding responsibilities to be tailored to individual needs as identified by managers through appraisal processes.

Reference to Safeguarding Children and Young People; Roles and Competencies for Healthcare Staff Intercollegiate Document.

Appendix 4 – Mandatory Training Matrix

STAFF GROUP	Safeguarding Children & Adults basic awareness and Domestic Abuse Awareness	Core Skills in Safeguarding Available through CCG PLT events or external conferences and events	Mental Capacity Act Training	Update Available through CCG PLT, LSCB or other events, practice based learning or evidence of reading journals/articles or briefings	PREVENT
<p>Level 1 For all employees (clinical & non-clinical) within a month of commencement of employment – online. Available through ESR, E-learning for health or NSCB website. Annual SG newsletter.</p>				<p>3 yearly</p> <p>Annual SG newsletter</p>	<p>PREVENT Home Office E-Learning</p> 
<p>Level 2 For clinical & non-clinical staff with regular contact with members of the public who do not have professional duty of care. (E.g. staff dealing with complaints). Available through ESR, E-learning for health or NSCB website.</p>				<p>3 Yearly</p>	<p>PREVENT Home Office E-Learning</p>
<p>Level 3 For all clinical staff with a professional duty of care for children, young people and vulnerable adults. This includes all GPs and practice nurses. E-learning Levels 1 and 2 with additional taught training for Level 3.</p>		<p>Multi agency taught training from Safeguarding Children and Adult Boards recommended.</p>	<p>Yes</p>	<p>A minimum of 6 hours over a 3 year period (2hrs per annum).</p>	 <p>PREVENT Home Office e-learning training</p>

Appendix 5

Safeguarding Supervision Strategy

Working on behalf of NHS Newark and Sherwood CCG, NHS Mansfield and Ashfield CCG, NHS Rushcliffe CCG, NHS Nottingham North and East CCG, NHS Nottingham West CCG, NHS Bassetlaw CCG, NHS Nottingham City



Safeguarding Supervision Strategy

Context of the safeguarding supervision strategy
 Healthcare commissioners must have effective supervision arrangements in place (NHSE, 2015, app 1).
 This strategy forms a part of the CCG's overall safeguarding strategy.
 Safeguarding supervision is embedded nationally and locally through: law; guidance; reports; policies.

Safeguarding is everyone's business

Health care professionals are expected to have knowledge of and keep to the relevant laws and policies about protecting and caring for children and adults at risk of harm (NMC 2015 & GMC 2012)



Working Together to Safeguard Children
A guide to inter-agency working to protect and promote the welfare of children

Key Law
[Children Act \(2004\): Section 11](#)
[Care Act \(2014\): Part 2](#)



Harmfreecare

Key Guidance
[HM Gov \(2018\) Working Together to Safeguard Children](#)
[NMC Safeguarding Standards](#)
[GMC \(2012\) Protecting CBYP](#)
[NHSE \(2015\) A Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework](#)
[RCP&CH \(2014\) Safeguarding Children and Young people: roles and competences for health care staff](#)

Local guidance and policies
[NSCB: NSAB: The CCG's safeguarding policy & strategies & guidance](#)

Key Recent National Reports & Recommendations:



Pathways to harm, pathways to protection: a triennial analysis of serious case reviews 2011 to 2014
Final report May 2016

How will the CCG meet its duty and obligations?

The CCG has appropriate systems in place for discharging their statutory duties in terms of safeguarding which includes the having appropriate supervision in place to ensure that their staff are competent to carry out their responsibilities for safeguarding.

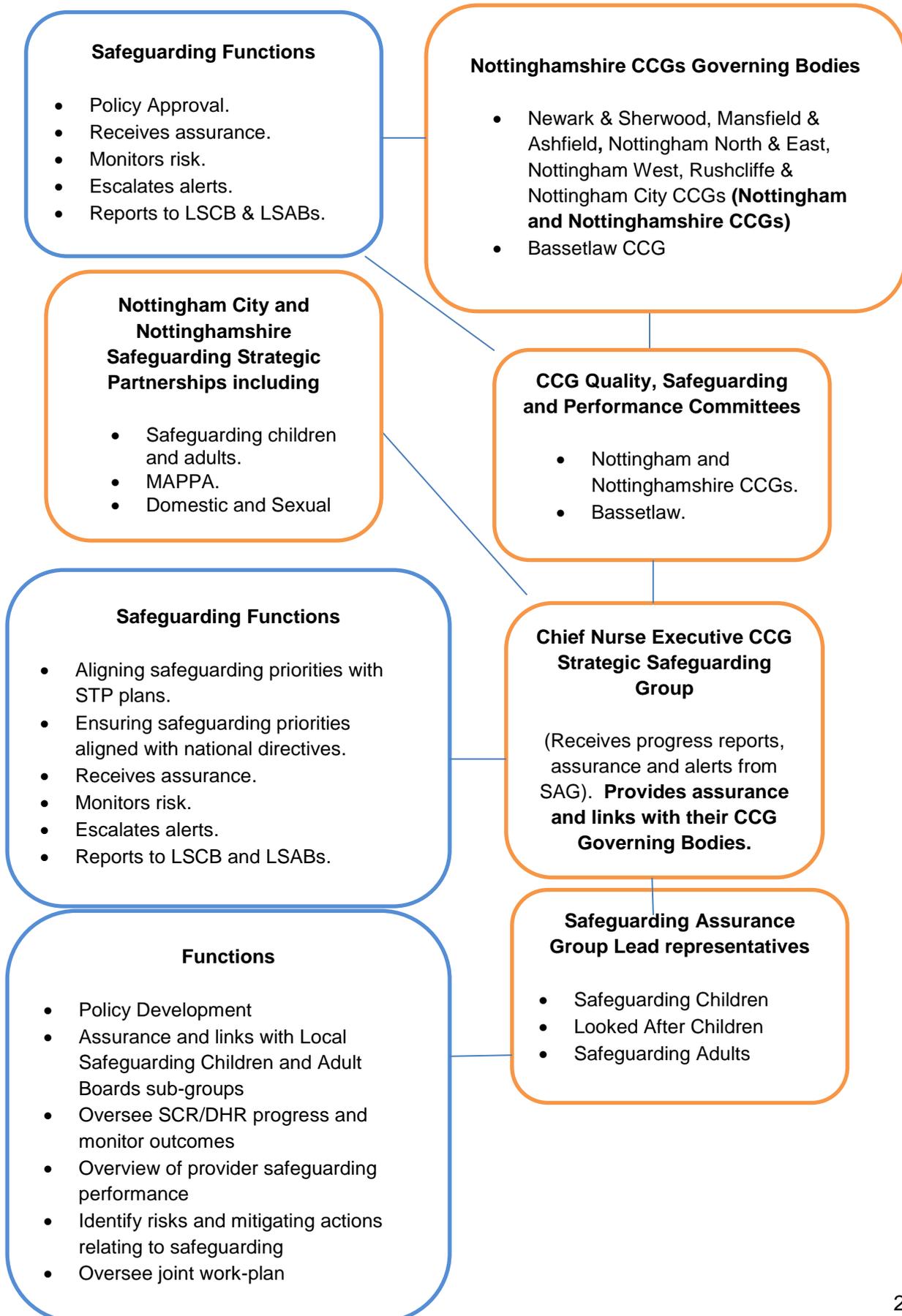
They will influence across the health systems so that supervision is prioritised to ensure that staff have the right skills and experience to best protect children and adult at risk of harm.
 Key to supporting this are the CCG's Designated & Named Professionals and Safeguarding Adult Leads.



January 2019 (V4) Review Date: January 2022

Appendix 6

Nottingham and Nottinghamshire Safeguarding Governance Structures



Appendix 7

Professionals with Lead Responsibilities for Safeguarding and Children Looked After in Nottingham City, Nottinghamshire, & Bassetlaw

Greater Nottinghamshire		Mid Nottinghamshire		Bassetlaw
Nottingham City	Rushcliffe	Nottingham North / East	Mansfield / Ashfield	Newark / Sherwood
CCG Leads for Safeguarding				
Director of Quality & Nursing Lead for PREVENT (County) & allegations against staff (South CCGs) 0115 883 1849		Chief Nurse & Director of Quality & Performance 01636 594 876		Chief Nurse & Executive Lead for Quality & Patient Safety 01777 863 321
		Deputy Chief Nurse, MAPPA Lead (County) & allegations against staff (North CCGs) 01636 594 876		Deputy Chief Nurse 01777 863362
Designated Nurse (DN) and Designated Doctors (DD) for Safeguarding Children or Children Looked After (LAC) Professional advice to commissioners, health professionals (local authority and LSCB)				
Nottingham City Designated Nurse 0115 883 9472 Assoc DN 0115 883 4386	Designated Nurse Safeguarding Children Nottingham County Val Simnett (DN) Associated Designated Nurse Nottinghamshire County y (Assoc DN) 01623 673 175			Cathy Burke Safeguarding Adults, Children & LAC and Deputy Chief Nurse (DN) 01777 862 394
Designated Nurse Looked After Children Nottingham City & County 0115 383 9524				Designated Doctor Looked After Children 01302 642 300
Nottingham City & Nottingham South Designated Doctor Looked After Children 0115 924 9924 Ext 31165		Mid Nottinghamshire Designated Doctor Looked After Children 01623 622 515		Designated Doctor Safeguarding Children 01302 366 666
Nottingham City James Fildes (DD) 0115 924 9924 Karen Aucott (DD) 0115 924 9924 Ext 64226	Nottingham South Designated Doctor Safeguarding Children Greater Notts 0115 924 9924 ext 62990		Mid Nottinghamshire Designated Doctor Safeguarding Children 01623 622 515 Ext 2782	
Named Nurses (NN) Named Midwives (NM) & Named Doctors (ND) for Safeguarding Children				
Notts Healthcare Trust inc. County Health Partnership Named Dr Safeguarding & Named Nurse Safeguarding 0115 955 5363 Named Nurse Looked After Children 07967 332 310 or 07967 332 432				
Nottingham City & South County Designated Nurse Safeguarding Adults Rhonda Christian - 0115 883 9205		Mid Nottinghamshire Head of Quality & Adult Safeguarding Sue Barnitt - 01623 673871		CCGs & GP Contracted Services 01777 863 362
Nottingham City & South County CCGs & GP Contracted Services Named GP contact tbc		Mid Notts CCGs & GP Contracted Services Named GP 01623 673 175		Named Nurse LAC 01909 501 707
Nottingham University Hospital NHS Trust Named Dr, Named Nurse and Named Midwife Safeguarding 0115 924 9924 ext 62921		Sherwood Forest NHS Trust Named Dr, Named Nurse and Named Midwife Safeguarding 01623 622 515 ext 4629		Doncaster & Bassetlaw NHS Trust Named Dr, Named Nurse and Named Midwife Safeguarding 01302 366 666
Nottingham City Care Named Nurse 0115 883 9600				