

NHS LEWISHAM
SAFEGUARDING ADULTS
ANNUAL REPORT
April 2017- March 2018

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CONTENTS

Section	Title	Page No.
1.	Purpose of the Report	3
2.	Local Context	3
3.	Safeguarding Obligations and Responsibilities including National Context	4
4.	Safeguarding Governance & Accountability Arrangements	5
5.	Safeguarding Adults Priorities/ Achievements in 2017/ 2018	7
5.1	Work within Nursing and Residential homes and the Community	7
6.	Safeguarding Monitoring and Assurance from Provider Organisations	7
7.	Safeguarding Partnerships	9
8.	Lewisham Safeguarding Adults Board	10
8.1	Safeguarding Adult Reviews	10
8.2	Domestic Homicide Reviews and Violence Women and Girls	10
8.3	Lewisham CCG	11
8.4	Lewisham CCG Mandatory Training	11
9.	Priorities	11
10.	Recommendations	12
	Appendices: Community Pressure Ulcer Report	13

1. The Purpose of the Report

- 1.1. The purpose of this Annual Safeguarding Adults Report is to assure NHS Lewisham Clinical Commissioning Group Governing Body that the CCG is fulfilling statutory duties to safeguard vulnerable adults.
- 1.2. To demonstrate how the health contribution to safeguarding and promoting the welfare of adults is discharged across the whole Lewisham health economy through Lewisham Clinical Commissioning Group's commissioning arrangements.
- 1.3. The report will inform the Governing Body of the progress made on the key priorities of the year and identify the main issues, risks, and key priorities relating to safeguarding vulnerable adults within Lewisham for the year pending.
- 1.4. The report also provides information about national changes which influence, local developments and activity, including safeguarding inspections.
- 1.5. The report is compiled with contributions from papers submitted by NHS England, South London and Maudsley (SlAM), NHS Lewisham and Greenwich Trust (LGT), the Local Authority and the IRIS Project team.

2. Local Context

- 2.1. NHS Lewisham CCG commissions health services for a growing population of approximately 301,300. The population is younger than for England as a whole with about one in eight people over 60 compared to about 1 in 4 or one in five people are over the age of 60. However life expectancy in Lewisham has been lower than in England as a whole and the average health status of those aged over 65 is similarly lower (worse) than for England.
- 2.2. Levels of deprivation in the Borough have declined since 2010 but concentrations of deprivation in the north and south of the borough remain comparatively high. The Borough is ranked 48th most deprived of all English Local Authorities.
- 2.3. The Borough is ethnically diverse, home to more than 75 nationalities and it is forecast that the population will be proportionately 50:50 White and BME by 2028. Amongst the younger generations (0-19) the proportion of the population of BME heritage has been at about 65% since 2011.
- 2.4. The Joint Commissioning unit based in the Council manages the commissioning of continuing healthcare for adults and provision is mostly through privately run care homes. Permanent admissions to residential and nursing care homes per 100,000 aged 65+ are lower in Lewisham than in England.

Lewisham LSAB

2.4.1 The Lewisham CCG works in partnership with the Local Safeguarding Adult Board and is charged with providing assurance to the Board. The priorities for assurance are shaped and directed by a number of factors including local demography alongside analysis of safeguarding activity from commissioned providers including training, learned from local case reviews and new initiatives.

3. Safeguarding Obligations and Responsibilities

3.1.1 This annual report is also set within the context of safeguarding responsibilities as defined by the “Care Act” (2014):

- Protecting a person’s right to live in safety
- Protecting a person’s right to live free from abuse and neglect with care and support needs *not necessarily commissioned by Local Authority
- Protecting people who may be in vulnerable circumstances

3.1. Effective safeguarding arrangements must be underpinned by two key principles:

- Safeguarding is everyone’s responsibility therefore, for services to be effective each professional and organisation should play their full part for adults and children
- For adults we use the term “adults at risk” to describe people with support needs. However not all adults who need care and support are considered at risk. Each person is assessed according to their own abilities and those with care and support needs may manage their lives well.

3.5 **NHS England** is responsible for ensuring that the commissioning system in London is working effectively to safeguard children and adults at risk of abuse or neglect.

The CCG has a duty to support NHS England with the quality of Primary Care Services. This role includes commissioning assurance as well as strategic leadership and influencing. Safeguarding Vulnerable People in the NHS – Accountability and Assurance Framework (NHS England, 2015a) clearly sets out the safeguarding responsibilities of NHS England.

NHS England ensures that the health commissioning system as a whole is working effectively to safeguard children and adults at risk of abuse or neglect. NHS England

is the policy lead for NHS safeguarding, working across health and social care, including leading and defining improvement in safeguarding practice and outcomes.

Key roles include:

- Providing leadership support to safeguarding professionals
- Ensuring the implementation of effective safeguarding assurance arrangements and peer review processes
- Providing specialist safeguarding advice to the NHS
- Leading a system where there is a culture that supports staff in raising concerns regarding safeguarding issues
- Ensuring that robust processes are in place to learn lessons from cases where children or adults die or are seriously harmed and abuse or neglect is suspected
- Ensuring that locally NHS England teams are appropriately engaged in the Local Safeguarding Boards and any local arrangements for safeguarding both adults and children

Over the past year, the London region Safeguarding Programme has delivered on several key pieces of work that reflect these commitments as listed in the Accountability and Assurance Framework.

Key pieces of work that the NHSE Programme continued to strengthen across the region included:

- Female Genital Mutilation (FGM)
- Prevent
- Modern Slavery Network
- Serious Adult Review Library
- Domestic Violence Consultation
- Workforce Review
- Safeguarding and Pressure Ulcer Guidance and Interface with Safeguarding Enquiry

3.5.1 Lewisham CCG Designated Professionals are represented at the NHS England forums.

4. CCG Safeguarding Governance & Accountability Arrangements

4.1. The current safeguarding governance arrangements for Lewisham CCG meet the statutory duty to safeguard and promote the well-being of vulnerable adults. There have been no vacancies in the safeguarding team.

4.2. Current CCG Responsibilities:

- **The Accountable Officer:** Andrew Bland, The Accountable Officer ensures that the responsibility to safeguard and prevention of harm to children, young people and vulnerable adults is discharged effectively across the whole health economy through Lewisham CCGs commissioning arrangements.
- **The Governing Body Lead** and Senior Clinical Director Lead for Safeguarding during the year was Dr Faruk Majid and was accountable to NHS Lewisham CCG Governing Body for providing assurance that the range of safeguarding statutory duties are discharged and all responsibilities met.
- **The Managing Director:** Martin Wilkinson is responsible for representing the CCG at the Lewisham Safeguarding Adults Board Executive.
- **Nurse Director:** Alison Browne is responsible for the management of the safeguarding team and supports the Governing Body Lead to undertake his role.
- **Designated Professionals:** Lewisham CCG has secured the expertise of the **Nurse Consultant and Adult Safeguarding Designate**. The role of the Nurse Consultant and Adult Safeguarding Designate is to provide the clinical expertise and strategic lead for the local health community and is a vital source of advice to the CCG, NHS England, the local authority and the LSAB. They also advice and support to other health professionals.
- **Safeguarding Nurse Advisor:** Lewisham CCG has also secured the expertise of the Safeguarding Nurse Advisor. This role functions as the Clinical Compliance Liaison and Safeguarding Nurse Advisor across the London Borough of Lewisham and takes the professional lead on all aspects of nursing and residential service delivery, providing specialist advice to the CCG and other external agencies where requested and within the scope of the role on health related adult protection and safeguarding matters; influencing service development across all providers, including those jointly commissioned with Social Service colleagues within the London Borough of Lewisham.

5. CCG Safeguarding Adults Priorities and Achievements in 2017- 2018

5.1. Work within Nursing and Residential homes and the Community.

The Safeguarding Nurse Advisor continues to support both nursing and residential homes in quality and safeguarding. An annual audit programme has been developed to include both document and medications management. Recommendations have been carried forward and re audit where necessary. The audit programme will be extended in 2019 to include areas such as infection control.

Additionally, the Community Pressure Ulcer Panel is chaired by the CCG and Community Acquired Pressure Ulcers were investigated for analysis of cause and learning with recommendations supported through engagement with the Safeguarding Nurse Advisor who chairs the Panel. The multi-disciplinary Panel includes the Lewisham and Greenwich Trust who act as critical friends and it is used for the purpose of delegated Safeguarding Enquiry under the Care Act 2014 by the Local borough Lewisham; this function also supports the contract monitoring team for LBL. Training has been supported by the LCCG providing support and education on tissue viability for the providers and process of root cause analysis. Quality is intrinsically linked with safeguarding. The LCCG has also supported Greenwich partners in the development of their pathway for community pressure ulcers and the alignment with department of Health recommendations.

Additionally LCCG has supported the uro sepsis project with partners in audit to encourage best practice encouraging hydration as part of a planned approach of reducing urinary tract infection. Education on hydration and resources were disseminated by the LCCG to raise awareness on the predisposing factors including dehydration contributing towards urinary tract infection.

The Safeguarding Nurse Advisor continues to support the weekly Multi Agency Safeguarding Conference chaired by LBL acting as health input to safeguarding enquiry.

6. Safeguarding Monitoring and Assurance from Provider Organisations

During 2016-2017 the CCG arrangements for seeking safeguarding assurance were reviewed. It was noted that there was a duplication of reporting for safeguarding. For example, the same safeguarding reports were presented at the provider safeguarding committees and then again at the CCG safeguarding Assurance meetings. It was usually the same participants attending these meetings. The CCG therefore decided to seek safeguarding assurance in two ways:

1. A new *CCG Health Safeguarding Operational Group* will receive and scrutinise safeguarding performance information and data. information received could be those provider organisation discussed at their respective safeguarding committees, those shared by health with Lewisham Safeguarding Boards, NHS England and

Clinical Commissioning Group

other statutory or mandatory returns. Bespoke reports to the CCG would only be sought from providers where other reporting arrangements do not provide sufficient assurance. For the purpose of assurance the Lewisham CCG has worked alongside other commissioning CCG's and Providers to develop Adult Safeguarding Dash Boards including those for the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards standards. The Lewisham CCG reviews Prevent data sets according to national Prevent strategy in partnership with NHSE from our providers.

2. To ensure continued sharing of safeguarding learning and improve safeguarding effectiveness across the local health economy; the CCG Safeguarding Leads would organise safeguarding conferences two or three times a year, focusing on relevant topics and invite all local healthcare providers to attend. The first NHS Lewisham CCG Health Safeguarding Conference was held on Monday 30th January 2017 which aimed to bring together health providers and commissioners from all sectors of the Lewisham health economy to share best practice on identifying and protecting people who are at risk of experiencing domestic violence. 60 people attended, with representation from general practice, LGT, SLaM, LBL, private providers, the LSCB, the LSAB, NHS England, and nursing homes. The attendees broke into groups to discuss two case studies adapted from Domestic Homicide Reviews that had occurred in Lewisham (DHRs). Feedback from respondents indicated that the conference was very good and interesting. Suggested changes have been acted upon, for example information on the local referral pathways for domestic abuse were widely disseminated. The Lewisham CCG continues to host Health Safeguarding Conferences aimed at bringing together health providers and commissioners from all sectors of the health economy to share best practice on identifying vulnerable people who are at risk. Conferences this year included "Neglect" and "Modern Day Slavery". The conferences continue to be well attended with representation from LGT, SLaM, LBL, private providers, the LSCB, the LSAB, NHS England, and nursing homes with positive respondent feedback. We continue to engage with specialist speakers across the health economy to support the delivery of these conferences.

3. **Lewisham and Greenwich NHS Trust (LGT)**

The Lewisham CCG continues to scrutinise Annual reports and quarterly generated Dash Boards in order to assure itself in that commissioned providers are protecting adults at risk as well as statutory Prevent data generated for NHSE. Examples:



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4. South London and Maudsley NHS Foundation Trust (SLaM)



MCA QA Tool -
2017-18 submitted to



Copy of SLAM Q4
2017 18 CCG safeguar

5. GP Services

Safeguarding arrangements in Primary Care remain strong. All General Practices in Lewisham have a Safeguarding Adult Lead General Practitioner, who takes the lead for safeguarding in the practice. They will receive supervision, training & support via a bi-monthly GP Safeguarding Leads meeting for children and this will be extended for adults September 2018. The named General Practitioner for children receives regular supervision from the Designated Doctor for safeguarding. The Nurse Consultant for Adults acts as a conduit for information and advice for General Practices. The support offered for this period includes advice generically on safeguarding adults, the Mental Capacity Act, Vulnerability and Neglect and support around best interest decisions and links with local borough Lewisham who lead on Adult Safeguarding. This is normally conducted by telephone consultation. Additionally the independent Chair of the Local Safeguarding Adult Board Professor Michael Preston-Shoot PhD, FACSS, SFHEA has engaged with Safeguarding Leads and has offered advice and support around neglect and capacity.

1. Training for GP Services

Training for adults at level 3 is shaped by the published Lewisham CCG GP Training Strategy. The General Practices have been offered a case study based on a real life scenario which goes towards a training portfolio at level 3 for adults on Care Plus Partnership with the aims of encouraging professional curiosity and reducing the threshold for asking in the context of adult safeguarding. A total of 6 General Practices have been trained and a total of 46 clinicians including GP's, Nurses and Health Care Assistants. (Areas covered in training include omissions of care, neglect, poor medicines management, breeches of legislation including the Mental Capacity Act and the Mental Health Act). Training for the Mental Capacity Act 2005 will be rolled out August 2018 and General Practices are already engaged and booked on all of the training which is delivered on location at the surgeries.

The General Practices are also encouraged to attend WRAP (Workshop to raise awareness of Prevent) (Prevent being part of the governments counter terrorism strategy) training and this has been delivered four times this period facilitated by Lewisham CCG with 80 plus clinicians across the health economy and General

Practices engaged with this training. This is delivered in partnership with Local Borough Lewisham. The Lewisham CCG also sits on the Prevent Delivery Group with other partners chaired by local borough Lewisham to support strategy around counter terrorism including training. Adult training is supported by the Nurse Consultant.

Joint Children and Adults training will be delivered September 2018 as well as the bespoke training delivered at General Practices. The General Practices are encouraged to attend the Health Safeguarding Conferences facilitated by the Lewisham CCG to support their level 3 adult safeguarding portfolio. Any news items on the changing landscape of adult safeguarding is disseminated via the CCG quality administrator to the adult leads such as legislative changes periodically.

7. Partnership

Partnership working remains a strong ethos for agencies in Lewisham. We collaborate with our partner commissioners in local borough Lewisham, the Local Adult Safeguarding Board, local borough Lewisham safeguarding quality team and other neighbouring CCGs in the work that we do to ensure the wellbeing of adults at risk are safeguarded. Examples of this are the development of joint dash boards for adult safeguarding assurance. We work with the LBL Prevent Steering group and the VAWG steering group in order to develop strategies across Lewisham. We endeavour to personalise safeguarding ensuring for example in the Community Pressure Ulcer Panel that we engage with nursing and residential homes and clients and important others in achieving best outcomes for safeguarding taking into account the needs and wishes of others. The Lewisham CCG and Nurse Consultant also supports the London Bromley/SLaM Project Group in their safeguarding strategic work with Bethlem Hospital and the obligation Bromley has as host agency for adult safeguarding enquiry.

8. LSAB

The CCG continues to attend and support the strategy of the LSAB and provide the necessary assurance to the Board.

8.1 Safeguarding Adult Reviews.

There are two statutory reviews in progress soon to be published and the Lewisham CCG continues to attend the Quality Review Group Chaired by the Independent Chair of the Lewisham Safeguarding Adult Board with other partners in the review, critique and learning from these events and methodology to disseminate learning. Both of these reviews are not yet in the public domain. There have also been a number of non-statutory reviews. Reviews are conducted when there the client has died as a result of whereas it could be seen that there were avoidable omissions and neglect in the care and management of the client and better partnership working required between agencies. The Nurse Consultant sits on this panel.

8.2 Domestic Homicide Reviews and VAWG

There is one DHR with the Home Office currently for critique and sign off and then it will be in the public domain and the Violence against Women and Girls group of which the Lewisham CCG sits on will support the learning with other partners. The Lewisham Clinical Commissioning Group is part of the Domestic Homicide Panel where IMR's are used to investigate and actions chaired by the independent Stand Together Organisation with the ambition of eradication Domestic Violence. The Nurse Consultant sits on this panel.

The Lewisham CCG supports the MARAC (Multi – Agency Risk Assessment Conference) where information is shared on high risk women of domestic violence where multiple partners meet to support and protect individuals (*partners from statutory and voluntary sectors). Lewisham with the support of NHSE is able to establish individuals who do not have an identified GP at the point of referral. Often these individuals are registered with a GP and the LCCG will feed back to MARAC the registered General Practice. This helps fill the gap in the protection planning and information sharing to reduce risk to the individual. The Lewisham CCG then distributes the minutes of the MARAC meetings to the identified individual Registered General Practices of the individual. (It has been demonstrated that good information sharing and partnership working reduces risk to women). All but 3 surgeries have signed up to the MARAC information sharing protocol which enables information sharing between MARAC and General Practice. This has steadily increased in 2017.

The IRIS project offers training, support and referral pathways for General Practices for victims of domestic violence. The aim of IRIS is to identify, and refer to improve safety. The IRIS steering group is chaired by the Lewisham CCG and partners within the IRIS project, Athena and Violence against Women and Girls lead attend the group. Meetings have moved from quarterly to biannually. Last quarter 3, 19 referrals were made onto IRIS. Thirty one surgeries have engaged in this project in Lewisham. MARAC referrals have increased by 50% of woman who are at high risk of domestic violence. 15 General Practices have been fully accredited by IRIS. Surgeries who do not engage with this project are escalated to Lewisham CCG in order to facilitate engagement. A total of 79 referrals have been made to the IRIS project since July 2016, the start-up. The Nurse Consultant is both the Chair and



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clinical lead for this project.

8.3 The Lewisham CCG

The Lewisham CCG has a policy for adult safeguarding supervision and the Nurse Consultant offers safeguarding supervision to the safeguarding nurse advisor and to other partners externally as part of good adult safeguarding practice. The team now receive external adult safeguarding supervision.

8.4 CCG mandatory training

E learning for level 1 Prevent training and Level 1 Safeguarding Adults and for those designated persons level 2 adult safeguarding is accessible on the workforce training platform. Generally across all divisions in the Lewisham CCG compliance is good however joint commissioning is not and this has been escalated on a number of occasions by the Nurse Consultant however engagement is limited. The training report for the CCG is generated quarterly and followed though by the designate and admin support and colleagues who are non-compliant are contacted to trigger completion. Additionally joint training for adults and children at level 3 has been provided for the Board and Executive team face to face. Domestic Violence awareness training face to face has been provided to nurse practitioners and interpreters. Modern day slavery awareness was presented to the CCG at team brief and these opportunities will continue to be used as an educational opportunity. Opportunities have also been used at the local GMC for strategy.

Summary

- The report demonstrates that the Lewisham CCG continues to meet statutory obligations to safeguard adults at risk in Lewisham.

9. Priorities for 2018-2019

Implementation of Joint Children and Adult Safeguarding training for General Practice.

Implementation of learning from SARS's and DHR's across the health economy of Lewisham.

Continued ongoing support and education to Primary Care.

Increased awareness and development of MCA 2005 and template for use in Primary Care.

10. Recommendations

The Governing Body is asked to receive the safeguarding adults report for information and assurance that effective safeguarding systems and processes are in place for Lewisham.

Appendix

Annual Reports informing Lewisham CCG Annual Safeguarding Adults Report



CARE HOMES
PRESSURE ULCER PA