



Northamptonshire  
Clinical Commissioning Group

**NHS Northamptonshire  
Clinical Commissioning  
Group**

**Safeguarding Children  
and Adults at Risk  
Policy**

Approved and ratified by the  
Northamptonshire Clinical Commissioning Group  
Integrated Quality, Safeguarding & Performance Committee  
on behalf of the Governing Body of  
**NHS Northamptonshire Clinical Commissioning Group**  
On:

**For Review: MARCH 2022**

### Version Control

Version No.	Date	Who	Status	Comment
1.	22-1-2014	Julie Ashby-Ellis Georgette Fitzgerald Jane Bell	Draft	Initial draft of policy document
2.	24-3-14	Julie Ashby-Ellis Georgette Fitzgerald Jane Bell	Draft	Reviewed and amended prior to submission to the Quality Committee on 10 June 2014
3.	8-4-2014	Jane Bell	Draft	Reviewed following comments and feedback
4.	10-6-2014	Jane Bell	Approved	Submitted to and approved by the Quality Committee prior to submission to the Governing Bodies of NHS Nene and NHS Corby Clinical Commissioning Groups for ratification
5.	17-6-2014	Peter Boylan	Ratified	Submitted to and ratified by the Governing Body of NHS Nene Clinical Commissioning Group
6.	24-6-2014	Peter Boylan	Ratified	Submitted to and ratified by the Governing Body of NHS Corby Clinical Commissioning Group
6.1	14-4-2015	Jane Bell	Approved	Updated version submitted to and approved by the Quality Committee
6.2	21-4-2015	Peter Boylan	Ratified	Submitted to and ratified by the Governing Body of NHS Nene Clinical Commissioning Group
6.3	28-4-2015	Peter Boylan	Ratified	Submitted to and ratified by the Governing Body of NHS Corby Clinical Commissioning Group
7.	28-4-2015	Quality Committee Administrator	Published	Published on the websites of NHS Nene and NHS Corby Clinical Commissioning Groups
7.1	12-4-2016	Tracy Keats	Approved	Updated version submitted to and approved by the Quality Committee
7.2	19-4-2015	Peter Boylan	Ratified	Submitted to and ratified by the Governing Body of NHS Nene Clinical Commissioning Group
7.3	26-4-2015	Peter Boylan	Ratified	Submitted to and ratified by the Governing Body of NHS Corby Clinical Commissioning
8.	26-4-2016	Quality Committee Administrator	Published	Published on the websites of NHS Nene and NHS Corby Clinical Commissioning Groups
8.1	10-10-2017	Tina Swain	Approved and Ratified	Updated version submitted to the Joint Quality Committee for approval and ratification on behalf of the Governing Bodies of NHS Nene and NHS Corby Clinical Commissioning Groups
9.	27-10-2017	Quality Committee Administrator	Published	Published on the websites of NHS Nene and NHS Corby Clinical Commissioning Groups
9.1.	11-12-2018	Tina Swain	Approved and Ratified	Updated version submitted to and approved and ratified by the Joint Quality Committee on behalf of the Governing Bodies of NHS Nene and NHS Corby Clinical Commissioning Groups
10.	14-12-2018	Quality Committee Administrator	Published	Published on the websites of NHS Nene and NHS Corby Clinical Commissioning Groups
11.				Version updated and submitted to

# Contents

- 1. Introduction .....4
- 2. Purpose .....4
  - a) Scope.....4
  - b) Definitions.....5
  - c) Principles.....5
- 3. The impact on the CCG following the publication of the Working Together 2018 (WT2018).....6
- 4. NHS England .....7
- 5. Clinical Commissioning Groups and Integrated Care Systems.....7
- 6. General roles and responsibilities for the CCG as Commissioning Organisation and a Statutory Safeguarding partner. ....7
  - 6.1 Executive Leadership / Head of Nursing and Safeguarding .....9
  - 6.2 Designated Professionals .....9
  - 6.3 Safeguarding in Primary Care..... 10
  - 6.4 Named Professionals ..... 10
  - 6.5 All NHS Northamptonshire Commissioning Group Staff..... 11
  - 6.6 Safeguarding Training ..... 11
    - 6.6.1 Monitoring Training ..... 12
    - 6.6.2 Evaluating Training ..... 13
    - 6.6.3 Evidencing Training..... 13
- 7. Managing Safeguarding Concerns..... 13
- 8. Child Safeguarding Practice Reviews (CSPRs)/ Safeguarding Adult Reviews (SARs)..... 14
- 9. Prevent ..... 14
- 10. Domestic Homicide Reviews ..... 14
- 11. Confidentiality and Information Sharing..... 15
- 12. Accountability and Governance Arrangements ..... 15
- 13. References..... 16
- Appendix 1 ..... 17
- Appendix 2 – CCG Safeguarding and Prevent Training Matrix ..... 18

## 1. Introduction

It is the responsibility of every NHS funded organisation and health care professional to ensure that people in vulnerable circumstances are safe and receive the highest possible standard of care. This policy sets out how, as a commissioning organisation, NHS Northamptonshire Clinical Commissioning Group (referred from now as the CCG) fulfils its statutory duties and responsibilities effectively both within its own organisation and across the local health economy.

CCGs and NHS England have statutory responsibilities for ensuring safe systems of care that safeguard children and adults at risk of abuse and neglect. The CCGs ensure they have in place robust structures, systems, standards and an assurance framework which enables compliance with legal and local governance arrangements.

The CCG works in partnership with all key stakeholders including but not exclusively commissioners, providers of health and social care services, the police and voluntary organisations to improve outcomes for vulnerable adults and children ensuring patients and their families get timely, appropriate care that ensures they are kept safe from harm.

The CCG adheres to the guidance and standards set out in *Working Together to Safeguard Children (WT)* (2018) updated, the Care Act (2014), the Health and Social Care Act 2012 (Regulated Activities) Regulations 2014 (part 3), the Care Quality Commission (Registration) Regulations 2009 (part 4) and NHS England Safeguarding *Vulnerable people in the Reformed NHS: Accountability and Assurance Framework 2019*).

A glossary of associated supporting documents can be found at Appendix 1.

## 2. Purpose

The policy sets out the CCG's arrangements for safeguarding and promoting the welfare of children, young people and adults at risk of significant harm. It should be read in conjunction with the local multi-agency procedures for the Northamptonshire Safeguarding Children Partnership (NSCP) and the Northamptonshire Safeguarding Adults Board (NSAB).

### a) Scope

As a commissioner of local health care, the CCG is responsible for safeguarding quality assurance through contractual arrangements with all provider organisations. The CCG has a duty to ensure that all health providers with whom they have commissioning arrangements discharge their functions with regard to the need to safeguard and promote the welfare of children and adults at risk of harm. All providers must demonstrate continued compliance with the Care Quality Commission (CQC) registration and quality standards.

## b) Definitions

The Children Act (1989, 2004) states “the welfare of the child is paramount”. All those in contact with children, young people or their families have a “duty to protect from harm” and promote the welfare of the child or young person by ensuring the care provided is safe and effective. In this policy, as in the Children Act (1989, 2004), a child is anyone who has not yet reached his or her 18th birthday. ‘Children’ therefore means children and young people throughout.

The Care Act 2014 introduced the term **adult at risk of abuse or neglect** as replacement to the previously used term ‘vulnerable adult’ to reflect that the adult is not the cause of potential abuse but the victim. Therefore within this policy the term “adult at risk” is used.

The Care Act 2014 states that safeguarding duties apply to an adult who:

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

## c) Principles

Safeguarding is a continuum of responses that seeks to prevent or respond to abuse and neglect. It is an umbrella term for both 'promoting welfare' and 'protecting from harm'.

In developing this policy the CCG recognises that safeguarding children and adults is a shared responsibility requiring effective joint working between agencies and professionals in order to ensure those vulnerable groups in society are to be protected from harm. In order to achieve this there must be constructive relationships at all levels, promoted and supported by:

- A commitment of senior managers, board members and governing body to seek continuous improvement with regards to safeguarding both within the work of the CCG and within those services commissioned.
- Clear lines of accountability within the CCG for safeguarding.
- Service developments that take account of the need to safeguard all service users, and are informed, where appropriate, by the views of service users.
- Staff training and continuing professional development so that staff have an understanding of their roles and responsibilities in regards to safeguarding children, adults at risk, children in care and the Mental Capacity Act.
- Safe working practices including recruitment and vetting procedures.
- Effective interagency working, including effective information sharing.

### **3. The impact on the CCG following the publication of the Working Together 2018 (WT2018)**

“Working Together to Safeguard Children 2018” was published in July 2018 and revised in December 2020. Clinical commissioning groups represent Health as one of the three statutory safeguarding partners as set out in Chapter 3 of WT 2018. NHS organisations remain subject to the section 11 duties under the Children Act 2004. However, the most significant change is in relation to the strategic partnership.

The guidance states that “to achieve the best possible outcomes, children and families need to receive targeted services to meet their needs in a coordinated way and that there should be a shared responsibility and effective joint planning between agencies to safeguard and promote the welfare of all children in a local area.

In order to do this effectively, local agencies should develop processes that promote: the commissioning of services in a co-ordinated way; and co-operation and integration between universal services such as schools, GP practices, adult services, early years settings, youth services and colleges, voluntary etc. All agencies need to cooperate in the local safeguarding arrangements, although the duty to make local arrangements rests with the three safeguarding partners’.

To achieve the best possible outcomes, children and families should receive targeted services that meet their needs in a co-ordinated way. Fragmented provision of services creates inefficiencies and risks disengagement by children and their families from services such as GPs, education and wider voluntary and community specialist support.

As set out in chapter 2 (WT 2018) many local organisations and agencies have a duty under Section 11 of the Children Act 2004 to ensure that they consider the need to safeguard and promote the welfare of children when carrying out their functions.

The strategic responsibility for this join-up locally rests with the three safeguarding partners who have a shared and equal duty to make arrangements to work together to safeguard and promote the welfare of all children in a local area.

To fulfil this role, the three safeguarding partners must set out how they will work together and with any relevant agencies. Relevant agencies are those organisations and agencies whose involvement the safeguarding partners consider may be required to safeguard and promote the welfare of children with regard to local need - GP’S, Northampton General Hospital, Kettering General Hospital, Northamptonshire Healthcare Foundation Trust, schools etc.

#### **Safeguarding partners** <sup>68</sup>

A *safeguarding partner* in relation to a local authority area in England is defined under the Children Act 2004 (as amended by the Children and Social Work Act, 2017) as:

- (a) the local authority
- (b) a clinical commissioning group for an area any part of which falls within the local authority area
- (c) the chief officer of police for an area any part of which falls within the local authority area

## **4. NHS England**

NHS England is responsible for ensuring that the health commissioning system as a whole is working effectively to safeguard and promote the welfare of children and adults. It is accountable for the services it directly commissions, but also leads and defines improvement in safeguarding practice and outcomes. From April 2016, under delegated arrangements, the CCGs are responsible for ensuring that the primary care services commissioned have effective safeguarding arrangements in place and are compliant with the Mental Capacity Act 2005.

## **5. Clinical Commissioning Groups and Integrated Care Systems**

This section reflects the changing language used to describe local commissioning organisations be they Clinical Commissioning Groups (CCGs), Primary Care Networks (PCNs) or Integrated Care Systems (ICSs).

Currently, CCGs are responsible in law for the safeguarding element of services they commission. As commissioners of local health services, CCGs need to assure themselves that organisations from which they commission have effective safeguarding arrangements in place. CCGs need to demonstrate that their designated clinical experts (for children and adults), are embedded in the clinical decision-making of the organisation, with the authority to work within local health economies to influence local thinking and practice.

The NHS Long-Term Plan states that ICSs will have a key role in working with Local Authorities at 'place' level. Through ICSs', commissioners will make shared decisions with providers on population health, service redesign and Long-Term Plan implementation. PCNs will be at the centre of these ICSs; building on the core of current primary care services enabling greater provision of proactive, personalised, coordinated and more integrated health and social care. Integral to the development of these networks is the support, guidance, peer assurance and review that can be provided for safeguarding children, young people, adults at risk and for the development of robust Mental Capacity Act processes.

## **6. General roles and responsibilities for the CCG as Commissioning Organisation and a Statutory Safeguarding partner.**

The ultimate accountability for safeguarding sits with the Accountable Officer of the

CCG. Failure to have systems and processes in place to protect children and adults in the commissioning process, or by providers of health care that the organisation commissions, would result in failure to meet statutory and non- statutory constitutional and governance requirements.

The CCG must establish and maintain robust governance arrangements with capacity and capability to deliver safeguarding responsibilities. The CCG should ensure safeguarding requirements are effectively included at all stages of the commissioning process ensuring that service users are protected from abuse and neglect. The CCG is required to:

- Establish clear lines of accountability for safeguarding, reflected in governance arrangements.
- All three Safeguarding Partners (the local authority, CCG and the police) have equal and joint responsibility for local safeguarding arrangements. In situations that require a clear, single point of leadership, all three Safeguarding Partners should decide who would take the lead on the issue that has arisen.
- Co-operate with the local authority in the operation of the Northamptonshire Safeguarding Children Partnership (NSCP) and Northamptonshire Safeguarding Adults Board (NSAB).
- Employ and secure the expertise of a Designated Doctor and Nurse for Safeguarding Children, a Designated Doctor and Nurse for Looked after Children and a Designated Paediatrician for Child Deaths.
- Have a Designated Nurse for safeguarding Adults and Mental Capacity Act Lead.
- Ensure that all providers with whom there are commissioning arrangements have in place comprehensive and effective policies and procedures to safeguard children and vulnerable adults in line with those of the NSCP / NSAB.
- Support improvements in the quality of safeguarding practice across primary medical care.
- Ensure that staff directly or indirectly employed by the CCG is aware of their roles and responsibilities for safeguarding and know who to contact and how to act on concerns in accordance with local NSCP/NSAB policies and procedures.
- Ensure that appropriate systems and processes are in place to fulfil specific duties of cooperation and partnership and the ability to demonstrate that the CCG meets best practice in respect of safeguarding children and adults at risk and children who are looked after.
- Ensure that safeguarding is at the forefront of service planning and a regular agenda item of the Board business.

The CCG will seek assurance from providers using a broad range of quality monitoring mechanisms drawing from quantitative and qualitative data including:

- A set of indicators included in the quality schedules of our contracts with providers.
- The completion of the combined Safeguarding Commissioning Assurance Tool (S-CAT)
- A dashboard of indicators relating to safeguarding adults and duties under the

Mental Capacity Act and Deprivation of Liberty Safeguards 2009 (DoLS). LPS

- Safeguarding site visits-planned and unannounced.
- Individual development work with providers.
- Attendance at a range of provider meetings.
- Child Safeguarding Practice Review /Safeguarding Adult Reviews from the Northamptonshire Safeguarding Boards.

## **6.1 Executive Leadership / Head of Nursing and Safeguarding**

There is an executive lead for safeguarding for the CCG who is supported by the Head of Nursing and Safeguarding to:

- Ensure that the CCG has a management and accountability structure that delivers safe and effective services in accordance with statutory, national and local guidance for safeguarding children and adults at risk in line with statutory requirements.
- Ensure that the Governing Body understands its role as a statutory partner and is kept up-to-date with safeguarding including areas of concern across the health economy.
- Ensure that Safeguarding Children and Adults feature as a key consideration when progressing plans as part of the Northamptonshire Sustainability and Transformation Partnership, with this being evident in published plans.
- Ensure that service plans/specifications/contracts/invitations to tender, etc. include reference to the standards expected for safeguarding children and adults at risk.
- Ensure that safe recruitment practices are adhered to in line with national and local guidance and that safeguarding responsibilities are reflected in all job descriptions.
- Ensure that staff in contact with children and/ or adults is trained and competent to be alert to the potential indicators of abuse or neglect and know how to act on those concerns in line with local guidance.

See section 6.6 Safeguarding Training Strategy.

The Executive Lead and the Head of Nursing and Safeguarding are members of the Northamptonshire Safeguarding Children's Partnership (NSCP), Northamptonshire Safeguarding Adults Board (NSAB), Health and Wellbeing Board and Corporate Parenting Board.

## **6.2 Designated Professionals**

- Designated leads will work across the local health system to support other professionals in their agencies on all aspects of safeguarding.
- To ensure the CCG meets the requirements of the Mental Capacity Act (MCA), including the Deprivation of Liberty safeguards (DoLS).
- To ensure that safeguarding children and adults at risk is an integral part of the

CCG clinical governance framework.

- To promote, influence and develop safeguarding training – on a single and inter- agency basis – to meet the training needs of staff.
- To provide clinical advice on the development and monitoring of the safeguarding aspects of contracts and service specifications.
- To provide a health perspective into single and multi-agency learning.
- To provide a coordinating role, resolving any interagency issues that may arise and liaising with the Safeguarding Boards as necessary.
- To provide advanced expert knowledge and advice on safeguarding children and adults to a wide range of professional groups and organisations/agencies and where necessary taking responsibility for the oversight of complex cases.
- To undertake statutory designated safeguarding functions as outlined in Working Together to Safeguard Children (2018) and detailed in the Intercollegiate Documents – Safeguarding Children and Young People (2019), Adult Safeguarding (2018) and Looked After Children (2020).

### **6.3 Safeguarding in Primary Care**

The Named GP and the Safeguarding Nurse Lead for General Practice have a key role in promoting good professional safeguarding practice within GP practices in Northamptonshire. They are supported by the Designated Professionals.

Under their registration with the Care Quality Commission, all providers must:

- Have effective arrangements in place to safeguard vulnerable children and adults.
- Ensure that those who use the services are safeguarded and that staff are suitably skilled and supported.
- Have evidence to demonstrate to their commissioners and the public that safeguarding processes are effective and robust.
- Ensure safeguarding processes are in place which include arrangements for;
  - Safe recruitment.
  - Effective and appropriate level of training for all staff, including non-clinical staff.
  - Effective supervision arrangements.
  - Working in partnership with other agencies.
  - Primary care providers and GP practices should have a lead for safeguarding, who should work closely with the CCG Named and Designated Professionals.

### **6.4 Named Professionals**

The CCG designated professionals provide support to health providers and independent contractor safeguarding leads, named doctors, nurses, midwives and other health professionals who take a professional lead within their organisation on safeguarding matters.

Named professionals have a key role in promoting good professional practice within their organisation, providing advice and expertise for fellow professionals, and ensuring effective safeguarding training is in place. They should work closely with their own organisation's executive safeguarding lead, designated professionals and the NSCP and NSAB Board.

The CCG ensures, through commissioning, that paediatricians with expertise in examining, identifying and assessing children and young people, who may have experienced abuse or neglect, are available to undertake medical examinations under child protection procedures. Resources and rotas must be such that children are seen in a timely manner.

## **6.5 All NHS Northamptonshire Commissioning Group Staff**

- To be alert to the potential indicators of abuse or neglect for children and adults and know how to act on those concerns in line with local guidance.
- To undertake training in accordance within their roles and responsibilities as outlined by local safeguarding agreements so that they maintain their skills and are familiar with procedures aimed at safeguarding children and adults at risk.
- To understand the principles of confidentiality and information sharing in line with local and national guidance.

## **6.6 Safeguarding Training**

All NHS commissioned services are responsible for assuring that all their employees have safeguarding children and adults training including prevent; and have the knowledge, skills and competence to undertake their roles. (Children Act 2004)

The Care Act (2014) came into force in April 2015 and provides a robust statutory framework to safeguard adults at risk of harm and children transitioning into adult services.

The Royal College of Paediatrics and Child Health (2019) Safeguarding Children and Young people: roles and competencies for health care staff provides a clear guidance in relation to content and level of training for all health organisations.

For individuals that are working for the CCG either substantively or as independent contractors assurance will be sought by the CCG from those individuals in accordance to the National Framework for Safeguarding Children, Safeguarding Adults and Prevent training.

Northamptonshire CCG recognises its responsibility to ensure that all commissioned services have a robust safeguarding training programme in place and that employees and volunteers are competent to safeguard children and adults'. Evidence of compliance with this outcome for commissioned services is achieved through the use of specific contractual arrangements and metrics with provider organisations.

This includes having in place: Key Performance Indicators (KPI), CQUIN schemes,

quality schedules, systems to embed learning from incidents and complaints, comprehensive single and multiagency safeguarding policies and procedures and a safeguarding training strategy and framework.

Northamptonshire CCG commission GP services across the county. To aid with the safeguarding Primary Care Training strategy and arrangements.

Northamptonshire CCG has developed a framework to assist staff in understanding their safeguarding responsibility within their role. The level of training that staff require is dependant of their roles and responsibilities (see training matrix Appendix 3). The training also provides staff with the knowledge and competence to identify and act upon safeguarding concerns appropriately.

All training provided should respect diversity (including age, culture/ race, gender religion/ belief, sexual orientation and disability) promoting equality and encouraging the participation of children, families and adults in the safeguarding process.

The safeguarding training strategy helps to continually promote a “Think Family” approach across the organisation to promote connectivity between the commissioning of adult and children’s services.

The CCGs Designated Nurses and Safeguarding Leads support the Head of Nursing & Safeguarding in relation to the safeguarding aspect of their role. They have the responsibility to ensure that the safeguarding training provided through e- learning and face to face is compatible with the national guidance as well as the local multi agency policies. They are also responsible for ensuring that lessons learnt from child safeguarding practice reviews, multiagency reviews, safeguarding adults review and domestic homicide reviews are incorporated into training.

All staff must undertake the correct level of safeguarding training identified against their job role and level of responsibility, accessible via e- learning within the first month of starting employment. This is clearly set out in the CCG’s training matrix (see Appendix 3). Designated Safeguarding Nurses and leads can also support managers with identifying the correct level of training.

### **6.6.1 Monitoring Training**

Following the completion of induction and the correct level of safeguarding training including Prevent, via e- learning, the ongoing compliance of safeguarding training should be monitored via the annual appraisal process and development plan. This is recorded by the CCGs’ Corporate Services.

The Designated Safeguarding Children Nurses, Safeguarding Adults lead and Human Resources will review staff roles against the required training framework annually. This is to ensure that all staff undertakes the correct level of training for their role and level of responsibility. If there are staff that are not undertaking the correct level of training or staff who are not compliant with safeguarding training, this will be escalated to their line manager.

## 6.6.2 Evaluating Training

The Safeguarding e-learning provider for the CCG is required to notify the CCG of amendments and updates made to the online training; for example changes to National Guidance. This is also reviewed annually by the Designated safeguarding leads.

The e-learning package available to CCG staff is a nationally recognised package. The Designated Safeguarding leads have also added links to local policy, procedure and process. This is also reviewed and updated annually by the Designated safeguarding Leads.

Face to face training delivered to CCG staff will be evaluated by participants and the trainers at the time of delivery.

To ensure staff remain knowledgeable about;

- who their safeguarding children lead is within the organisation
- who their safeguarding adults lead is within the organisation
- How to raise a safeguarding adult alert
- How to raise a safeguarding child concern and/or child protection concern

## 6.6.3 Evidencing Training

Certificates of attendance will be produced electronically for participants who attend either face to face training or via e learning.

Individual staff are expected to keep their own evidence of training and inform their line manager. This is also recorded and evidenced as part of the appraisal and development plan process which is recorded on the Electronic Staff Records (ESR).

## 7. Managing Safeguarding Concerns

If an employee of the CCG has concerns that a child or an adult is at risk of harm they should notify their line manager and or a member of the CCG safeguarding team. If a staff member is not available to speak to, a referral should be made to Northamptonshire County Council as per local policies and procedures.

Local procedures can be accessed via:

For children:

[www.northamptonshirescb.org.uk/pm](http://www.northamptonshirescb.org.uk/pm)

For adults:

<https://www.northamptonshire.gov.uk/councilservices/adult-social-care/Pages/default.aspx>

## **8. Child Safeguarding Practice Reviews (CSPRs)/ Safeguarding Adult Reviews (SARs)**

All serious incidents involving children and adults at risk must be reported to the CCG designated professionals.

The designated professionals, working in collaboration with the local authority and NSCP/NSAB board specifically support the monitoring of health CSPR/ SAR recommendations.

The CCGs' designated professionals coordinate and evaluate the health services inputs into the CSPR/SAR and provide professional scrutiny and challenge.

The CCG must ensure that the review and all actions following the review are carried out according to the timescale set out by the CSPR/SAR panel.

The Head of Nursing and Safeguarding ensures recommendations where there are commissioning implications, are reported back through relevant CCG governance channels to inform future commissioning. Examples of good practice and lessons to be learned should be disseminated across all levels of the organisation.

## **9. Prevent**

Prevent is part of the national strategy, Contest (2018), led by the Home Office that focuses on working with individuals and communities who may be vulnerable to the threat of violent extremism and terrorism. Supporting vulnerable individuals and reducing the threat from violent extremism is a priority for health services and partners.

NHS Northamptonshire CCG has incorporated key elements of the Prevent strategy within its safeguarding procedures, protocols and guidelines. The CCG is required to ensure that each provider includes the principles contained in the Government Prevent Strategy and the Prevent Guidance and Toolkit and has programmes in place to raise awareness of Prevent in line with the NHS England Prevent Training and Competences Framework. Each provider must have a nominated Prevent lead. The CCG Prevent lead is the Designated Nurse for Adult Safeguarding. Services must be able to demonstrate local multiagency partnership working on the Prevent agenda.

## **10. Domestic Homicide Reviews**

The CCG acknowledges that domestic abuse and violence is a serious public issue. Victims of domestic abuse may, or may not fall under the category of an 'adult at risk,' but they are entitled to protection. Help, advice and support is accessed via specialist domestic abuse providers. The CCG recognises that individual CCG staff members may be affected by domestic abuse and the designated nurses' act as a point of contact for advice and support.

Domestic Homicide Review's (DHR's) were established on a statutory basis under Section 9 of the Domestic Violence, Crime and Victims Act 2004 and came into force in 2011. Statutory guidance is in place (Home Office 2013)

A DHR means a review of the circumstances in which the death of a person aged 16 or over has or appears to have, resulted from violence, abuse and neglect by a person to whom they were related or have/had an intimate relationship or a member of the same household.

This legal requirement is similar to the CSPR/SAR process and has been established to ensure agencies are responding appropriately to victims of domestic violence by offering and putting in place appropriate support mechanisms, procedure, resources and interventions. The aim is to avoid future incidents of domestic homicide and violence.

The CCG have a duty to have regard to the guidance and to ensure that providers across the health economy have made the necessary arrangements to respond to this statutory guidance. These will be monitored as part of the quality contracting monitoring process.

## **11. Confidentiality and Information Sharing**

The CCG and all commissioned services are required for their staff to be cognisant of the NSCP and NSAB information sharing policy. Confidential information about a child or adult at risk should never be used casually in conversation or shared with any person other than on a 'need to know basis'.

Personal information is subject to the principles of the Freedom of Information Act 2000, the Data Protection Act 2018, the Human Rights Act 1998, the General Data Regulations (GDPR) and the common law of confidentiality.

There are some circumstances when staff may be expected to share information, for example, when abuse is alleged or suspected. Organisations hold information that under the Data protection Act 2018 is regarded as confidential. All providers are required to ensure staff are up to date with information governance training.

The Data Protection Act and GDPR do not prevent the sharing of information for the purposes of keeping children and vulnerable adults safe.

The safety of the child or adult at risk is paramount when considering whether to share information. Reasons for decisions to share, or not to share, must be recorded.

## **12. Accountability and Governance Arrangements**

To ensure that that safeguarding is integral to the governance arrangements of the CCG, the safeguarding team will report bi-monthly to the Integrated Quality, Safeguarding and Performance Committee.

The purpose of the report is:

- To provide assurance on the safeguarding arrangements in place across the organisation and within commissioned services.
- To ensure that the CCG is kept informed of national and local initiatives for safeguarding.
- To brief the CCG on learning from reviews and audits that are aimed at driving improvements to safeguard children and adults at risk.

### **13. References**

HM Government (2014) Children Act 2004 London. HMSO HM Government (2014) Care Act London HMSO

RCPCH (2019) Safeguarding Children and Young people: roles and Competencies for health Care staff. London RCPCH

RCPCH (2018) Adult Safeguarding: Roles and Competencies for Health Care Staff. London. RCPCH

RCPCH (2020) Looked after Children: Roles and competencies of healthcare staff. London. RCPCH

## Appendix 1

The following guidance, documents, reports and legislation also govern how services should be provide, managed and monitored:

- The Children Act 1989 and 2004.
- HM Government 2007. Statutory guidance on making arrangements to safeguard and promote the welfare of children under section 11 of the Children Act 2004. Updated March 2007. London: Department for Education and Skills.
- Working together to Safeguard Children (DfE 2018)  
<http://www.workingtogetheronline.co.uk/index.html>
- Letter – David Nicholson letter July 2009 Safeguarding Children Declarations.
- When to suspect child maltreatment NICE 2009.
- Information Sharing Guidance: Advice for Practitioners Providing Safeguarding Services (DFE 2015).
- Data Protection Act 1998.
- Intercollegiate Safeguarding Children and Young People: Roles and competencies for healthcare staff ( Royal College of Paediatrics and Child Health 2014)
- The Functions of Clinical Commissioning Groups (DH, 2012)
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (part 3)
- Care Quality Commission (Registration) Regulations 2009 (part 4)
- Protecting Children and Young People: the responsibilities of all doctors. (GMC, 2012)
- Human Rights Act 1998
- Mental Health Act 1983
- Equality Act 2010
- Safeguarding Vulnerable Groups Act 2006
- Mental Capacity Act 2005: Code Of Practice ( Department for Constitutional Affairs 2007)
- The Care Act 2014
- Deprivation of Liberty Safeguards 2009
- Prevent Duty Guidance 2015 HM Government
- Safeguarding Vulnerable People in the NHS - Accountability and Assurance Framework ( NHS England, 2015)
- Report of Mid Staffordshire NHS Foundation Trust, Public Inquiry; Feb 2013
- Department of Health 2011, Safeguarding Adults. The Role of Commissioners
- Domestic Violence Crime and Victims Act 2004
- Multi-Agency Statutory Guidance for the Conduct of Domestic Homicide Reviews (2013)
- Serious Incident Framework : Supporting Learning to Prevent Recurrence (NHS England 2015).

## Appendix 2 – CCG Safeguarding and Prevent Training Matrix

Safeguarding Children, Adults and Prevent Matrix				
Course	Frequency	Staff	Knowledge skills, competences and comments	Access
Induction pack adult & children Prevent Awareness	On commencement of employment	All Staff	See Intercollegiate Document <a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	Induction pack Prevent Via e learning on the NHS England website <a href="http://www.england.nhs.uk/ourwork/safeguarding/our-work/prevent/">www.england.nhs.uk/ourwork/safeguarding/our-work/prevent/</a>
Level 1	Within the first month of commencement of employment then  Every 3 years for non-clinical staff.	All Nene and Corby CCG staff (apart from those staff identified as requiring a different level - see below)	See Intercollegiate Document  <a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	E- learning  All staff will be provided with a log-in to complete mandatory training via their CCG Electronic Staff Record (ESR)  GPs/GP staff can access accredited on-line training via this link <a href="http://gp.neneccg.nhs.uk/safeguarding/">http://gp.neneccg.nhs.uk/safeguarding/</a>
Level 2	3 – 4 hours over a 3 year period	All staff whose work brings them directly into contact with children, young people, parents /carers and adults at risk.	See Intercollegiate Document  <a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	E- learning  All staff will be provided with a log-in to complete mandatory training via their CCG Electronic Staff Record (ESR)
Level 3	12 – 16 hours over a 3 year period	Staff who predominately work with children, young people, parents /carers and adults at risk. Adults who potentially contribute to the assessment and evaluation of need  (e.g. GPs and practice nurses). Staff working with Learning disabilities, mental health difficulties, experiencing domestic abuse or have alcohol and drug dependencies.	<a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	Face to Face Level 3 sessions available  Annually  GPs/GP Staff Training delivered by CCGs Safeguarding Team <a href="http://gp.neneccg.nhs.uk/safeguarding/">http://gp.neneccg.nhs.uk/safeguarding/</a>

		Note: this may also include staff who lead on commissioning care for CYP or adults in high risk groups e.g. learning disability; mental health		Children: <a href="http://www.northamptonshirescb.org.uk/about-northamptonshire-safeguarding-children-partnership/training/">http://www.northamptonshirescb.org.uk/about-northamptonshire-safeguarding-children-partnership/training/</a> Adults: <a href="http://lgss.learninpool.com/">http://lgss.learninpool.com/</a>
Level 4	24 hours over a 3 year period	Specialist safeguarding roles & named professionals	See Intercollegiate Document <a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	National Conference Peer support Supervision
Level 5	24 hours over a 3 year period	Designated Safeguarding professionals Looked After Children Designated Professional Lead consultant for unexpected Death	See Intercollegiate Document <a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	National Conference Peer support Supervision
Governing Body	Every three years	Chair of the Governing Body, Chief Officer, Directors and Members	See Intercollegiate Documents (March 2014 and March 2015) (Level 1 e-learning and specific Governing Body learning) <a href="https://www.rcn.org.uk/professional-development/publications/pub-007069">https://www.rcn.org.uk/professional-development/publications/pub-007069</a>	Level 1 e-learning & specific face to face update from Safeguarding Team <a href="http://gp.neneccg.nhs.uk/safeguarding/">http://gp.neneccg.nhs.uk/safeguarding/</a>