Merton and Wandsworth Clinical Commissioning Group Safeguarding Children Annual Report

2017/18

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Foreword

This is the first Merton and Wandsworth Clinical Commissioning Groups (CCG) Annual Safeguarding Children Report. The CCGs moved into a shared arrangement for the Designated Nurse posts in February 2017: Designated Nurse Safeguarding Children, Designated Nurse Looked After Children and Designated Safeguarding Adults Lead.

The content of this report is based on the quarterly safeguarding children reports submitted by the Designated Nurse Safeguarding Children and approved by Merton and Wandsworth Safeguarding Committee relating to 2017/18.

This report is to be read in conjunction with the Merton CCG and Wandsworth CCG Children Looked After Annual Reports 2017/18 and Merton Safeguarding Children’s Board (MSCB) and Wandsworth Safeguarding Children’s Board (WSCB) Reports 2017/18.

It is to be noted that Merton Local Authority was inspected in May 2017 by OFSTED (report published August 2017) and was rated ‘good’ and ‘outstanding’ for adoption performance and leadership, management and governance:

Link: https://reports.ofsted.gov.uk/provider/44/315

At the time of writing this annual report Wandsworth Local Authority had been re-inspected by OFSTED (May - June 2018) with the report published July 2018. The Local Authority was rated as ‘requires improvement to be good’ with a ‘good’ rating for the progress and experience of care leavers:

Link: https://reports.ofsted.gov.uk/local-authorities/wandsworth

St George’s University Hospital NHS Trust had also been re-inspected by CQC with the report published July 2018. The Trust was given an overall rating of ‘requires improvement’:

Link: https://www.cqc.org.uk/location/RJ701

Both Wandsworth Local Authority (LA) and St Georges University Hospital NHS Trust have made significant progress in improving the performance of their respective services and this is reflected in the current ratings.

Liz Royle  
Head of Safeguarding / Designated Nurse Safeguarding Children  
Merton CCG and Wandsworth CCG
1. **Introduction:**

1.1 This annual report 2017/18 seeks to demonstrate how Merton and Wandsworth Clinical Commissioning Groups (MCCG and WCCG) in discharging their functions as commissioners of healthcare services, have been assured that the arrangements to safeguard children and young people have been effective, compassionate and most importantly listened to and engaged children and young people. In addition, the annual report provides assurance that MCCG and WCCG have in 2017/18 achieved compliance with the duties and responsibilities as outlined by existing legislation, guidance and frameworks:

- Working Together to Safeguard Children (2015)*.


1.2 Safeguarding is embedded within the wider duties of all organisations across the health system, with provider organisations charged with the duties and responsibilities of delivering safe and high quality care and commissioners being charged with the responsibilities and duty to be assured of the safety and quality of the services commissioned. The annual report 2017/18 will give an overview of the performance of each provider highlighting achievements, risks and actions for 2018/19.

1.3 Safeguarding duties for commissioners of health services as a minimum requirement are (NHSE 2015):

- A Designated Doctor and Designate Nurse for Safeguarding Children to support and provide expert advice on the commissioning of services;
- An executive lead for safeguarding;
- Effective policies and procedures, safer recruitment, training, supervision and reporting arrangements for safeguarding adults and children that link to local procedures for the Local Safeguarding Children Board (LSCB) and Safeguarding Adults Board (SAB);
- Arrangements in place to ensure services they commission are safe for children and young people who may be at risk of abuse or neglect;
- Arrangements in place to ensure the health commissioning system as a whole is working effectively in disseminating policy and escalating key issues and risks.

These are the duties against which the performance of Merton and Wandsworth CCGs are to be measured.

2. **Merton and Wandsworth CCG’s Compliance with safeguarding statutory duties:**

2.1 The Merton CCG Safeguarding Annual report 2016/17 set the following objectives for 2017/18:
• Progress work to align safeguarding governance, policies and procedures across the two CCGs.
• Develop and deliver a safeguarding training offer to primary care.
• With additional investment develop a programme of support for GPs – CQC preparedness.

2.2 The progress of the work to align safeguarding governance, police and procedures is monitored through a work plan at the safeguarding committee. The governance arrangements are in place with the Merton and Wandsworth CCG Safeguarding Committee, chaired by the Director of Quality and Governance and reporting to the Integrated Governance and Quality Committee (IGQC). The CCG Governing Bodies (GB) receive an annual safeguarding children report. The work to align polices remains in progress.

2.3 The Merton Named GP for Safeguarding Children post remains vacant despite the efforts of Merton CCG to recruit to this post. The impact of this vacancy is in part mitigated by the Head of Safeguarding / Designated Nurse Safeguarding Children, however this role is a shared post across the two boroughs so has limited capacity to offer safeguarding children training to primary care staff. In 2017/18 staff in primary care have been signposted to Merton Local Safeguarding Board (MSCB) training offer. In 2018/19 there will be safeguarding training hosted by the CCG safeguarding team, with the first being 24th October 2018. It should be noted that where possible the Head of Safeguarding / Designated Nurse Safeguarding Children has contributed to Primary Care Learning Events delivering safeguarding training at levels 2 and 3.

2.4 Support to GP Practices in their preparation for CQC inspection has not been a universal offer however, when requested, the Head of Safeguarding / Designated Nurse Safeguarding Children has offered both telephone and face to face support.

2.5 The Wandsworth CCG Annual Report 2016/17 set the following objectives for 2017/18:

• Progress work to align safeguarding governance, policies and procedures across the two CCGs.
• Support the progress of Child Protection Information Sharing (CPIS).
• Improve CCG staff safeguarding training compliance.
• With additional investment develop a programme of support for GPs – CQC preparedness.

2.6 The work to align safeguarding governance, policies and procedures is addressed in section 2.2. GPs in Wandsworth benefit from having a Named GP for Child Safeguarding in post who has developed and delivered a programme of safeguarding children training and updates in 2017/18.

2.7 The Merton and Wandsworth CCG safeguarding children statement has been approved by the Merton and Wandsworth Safeguarding Committee and is published on both CCG websites with the next review date in 2019. This annual statement provides current safeguarding information and assurance to the public as to Merton and Wandsworth CCG’s compliance with safeguarding legislation, statutory and commissioning guidance.

Link:
http://www.mertonccg.nhs.uk/about-us/Governance/Pages/Child-safeguarding.aspx
http://www.wandsworthccg.nhs.uk/aboutus/Governance/Pages/Child-Safeguarding.aspx
2.8 In 2017/18 CCG staff training compliance has been variable due to both compliance and reporting issues. Safeguarding training compliance for the CCGs is recorded (April 2018) as 90% Level 1 and 100% Level 4.

2.9 Wandsworth CCG participated in the Wandsworth Safeguarding Children Board (WSCB) Section 11 process which included the submission of strategic assessment and an online staff survey. The CCG Section 11 action plan was presented to the WSCB April 2018. Key areas identified from the online staff survey included:

- Access to face to face safeguarding training.
- Review of online training to update and give a ‘local’ focus.
- Access / signposting to specialist training – radicalisation / Female Genital Mutilation (FGM).
- LADO – the role and function of the Local Authority Designated Officer.

The action plan is progressing and has been presented at the CCG Safeguarding Committee.

2.10 The Wandsworth GP Section 11 action plan has been shared at the CCG Safeguarding Committee. GP leads for Safeguarding for each GP Practice in Wandsworth are invited to attend a quarterly GP forum chaired by the Wandsworth Named GP where current issues and challenges are discussed. Child Safeguarding cases are reviewed and liaison with Social Care takes place face to face, improving multiagency working. These lead GPs have been trained to level 3 but also to deliver level 1 training to all their non-clinical General Practice Staff. The GP action plan identifies areas where GPs and Practice staff need further focus on their safeguarding learning and this has been rolled out in both the level 3 face to face training programme for GPs and Practice Nurses and Health Care Assistants (HCAs) and in the updated presentation for level 1 Training delivered by GP leads.

2.11 Merton CCG in 2017/18 submitted a Section 11 Audit to MSCB and has an action plan in place to ensure continuous improvement of safeguarding arrangements. The Section 11 Challenge Panel will be held in Q3 2018/19.

2.12 Merton CCG is represented on the MSCB by the Director of Quality and Governance, Designated Doctor and Designated Nurse. Attendance at MSCB Board by a Merton CCG is 100%.

2.13 The Designated Nurse is chair of the Merton Safeguarding Children Board (MSCB) Policy Subgroup and in 2017/18 has overseen the development and approval of MSCB policy and strategy documents.

2.14 Wandsworth CCG is represented on the Wandsworth Safeguarding Children Board (WSCB) by the Director of Quality and Governance, Designated Doctor and Designated Nurse. Attendance at WSCB Board by Wandsworth CCG is 100%.

2.15 The Designated Nurse is chair of the WSCB Workforce and Training Subgroup and in 2017/18 has overseen the development and delivery of the WSCB training offer which includes Learning from Experience Events (February and June 2018) and the Annual Conference (December 2017). The Designated Doctor for child safeguarding chairs
Wandsworth LSCB Child Death Overview Panel (CDOP). The CDOP has been an ‘early adopter’ of digital information sharing (eCDOP), which will be a step change in terms of efficient working. The Designated Doctor also chairs the WSCB Performance, Information, Exchange and Improvement (PIXI) Panel which continues to work to collate data for the LSCB, and has now developed a model based on the LA Improvement Board dataset and figures from other agencies based on Key Performance Indicators (KPIs) that are provided elsewhere.

2.16 Both the Designated Doctor, Named GP for Safeguarding and Designated Nurse contribute to safeguarding arrangements on a pan London and national level.

2.17 The Designated Doctor is chair of the National Network of Designated Healthcare Professionals (NNDHP), which involves advising NHS England (NHSE), Department of Education (DfE) and Department of Heath and Social Care (DHSC). He also co-chairs the NHSE National Safeguarding Steering Group (NSSG). This work at national level has helped to inform advice to the CCG, the SWL Alliance and Wandsworth Safeguarding Children Board.

2.18 The Designated Nurse continues to chair the London Children Looked After (CLA) Nurses Forum with the Designated Looked after Nurse as co-chair. The London CLA Forum has organised the delivery of two learning events (November 2017 / March 2018) for London CLA Nurses set at level 5 competency (RCPCH 2015).

2.19 The Children and Social Work Act 2017 established Safeguarding Partnerships which will replace the LSCB created under the Children Act 2004. The three statutory partners with the responsibility to oversee effectiveness and robustness of safeguarding children arrangements are the Local Authority, Police and Health - CCG. The WSCB, MSCB and South West London Alliance have held workshops to ascertain the views of existing partners as to how this change might be implemented and there are currently high level discussions as the way forward in regard to the safeguarding Partnerships. The Child Death Review process will also change significantly as a result of the legislation although the detailed guidance is yet to be published at time of writing. Arrangements for serious case reviews are also changed by the legislation with a new national panel taking greater authority and producing its own reviews about cases of potentially national significance.

2.20 The impact of shared Merton and Wandsworth CCG safeguarding arrangements implemented in February 2017 in regard to the Designated Nurse roles will be subject to external review in 2018/19.

3. Safeguarding children assurance from commissioned services 2017/18:

3.1 Merton and Wandsworth CCGs require provider organisations to submit information in regard to their safeguarding children arrangements and activity. The purpose of this reporting is to assure the CCGs that the services commissioned are safe, effective in achieving good outcomes for children and young people and comply with national guidance and statutory duties.
3.2 The healthcare providers submitting safeguarding children data are:

- South West London and St George’s Mental Health NHS Trust.
- Central London Community Health Care (CLCH).
- St George's University Hospital NHS Foundation Trust.
- Epsom and St Helier University Hospital NHS Trust.

3.3 South West London and St George’s Mental Health NHS Trust

The 2016/17 Annual Report identified the following as areas of improvement for the Trust in 2017/18:

- Improve training and supervision compliance – PREVENT / Level 3.
- Attend MSCB Challenge Panel Section 11.

The Trust has significantly improved safeguarding children training compliance, however Prevent compliance requires further improvement. The Trust has participated in both the MSCB and WSCB Section 11.

Table 1: South West London and St George’s Mental Health NHS Trust Safeguarding children training compliance 2017/18

<table>
<thead>
<tr>
<th>Safeguarding Children training level %</th>
<th>Q1 2017/18</th>
<th>Q2 2017/18</th>
<th>Q3 2017/18</th>
<th>Q4 2017/18</th>
<th>Target 80% level 2</th>
<th>Target 90% level 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>All staff trained at L2</td>
<td>80%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Level 2</td>
<td>94%</td>
<td>96.3%</td>
<td>98%</td>
<td>97%</td>
<td>80%</td>
<td></td>
</tr>
<tr>
<td>Level 3</td>
<td>83%</td>
<td>85.1%</td>
<td>91%</td>
<td>93%</td>
<td>90%</td>
<td></td>
</tr>
<tr>
<td>Level 4</td>
<td>100%</td>
<td>No data</td>
<td>100%</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PREVENT WRAP</td>
<td>19.2%</td>
<td>62%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3.4 The Trust was inspected by CQC (report published June 2018) with an overall rating of ‘good’: Link: [https://www.cqc.org.uk/provider/RQY](https://www.cqc.org.uk/provider/RQY)

3.5 The following area remains as requiring for improvement in 2018/19:

- Report on practitioner supervision compliance.
- Improve compliance with Prevent training.

3.6 Central London Community Health Care (CLCH)

3.7 CLCH from 1st April 2016 became the children community services provider in Merton. The Merton 2016/17 annual report identified the following as areas of improvement for the Trust in 2017/18:
• Improve training and supervision compliance - level 4.
• Attend MSCB Challenge Panel Section 11.

CLCH has achieved both an improvement training and supervision compliance and presented at the MSCB Section 11 Challenge Panel.

3.8 CLCH has demonstrated improvement in safeguarding training and supervision compliance throughout 2017/18.

Table 2: CLCH Safeguarding Children Compliance 2017/18

<table>
<thead>
<tr>
<th>Safeguarding Children training level</th>
<th>Q1 2017/18</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Target 90%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>98.31%</td>
<td>100%</td>
<td>98%</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>Level 2</td>
<td>90.85%</td>
<td>90%</td>
<td>88.6%</td>
<td>87%</td>
<td></td>
</tr>
<tr>
<td>Level 3</td>
<td>94%</td>
<td>92%</td>
<td>94%</td>
<td>94%</td>
<td></td>
</tr>
<tr>
<td>Level 4</td>
<td>66%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td></td>
</tr>
<tr>
<td>PREVENT (WRAP)</td>
<td>86%</td>
<td>85%</td>
<td>84%</td>
<td>85%</td>
<td>NHSE target 85%</td>
</tr>
</tbody>
</table>

3.9 Safeguarding children supervision compliance is reported as 100% for the Merton safeguarding children team. The supervision compliance for staff groups is reported at 91%.

3.10 CLCH is rated a ‘good’ by the CQC with the last inspection in 2017:

Link: https://www.cqc.org.uk/provider/RYX

The following area is to remain requiring for improvement in 2018/19:

• Level 2 Safeguarding children training.

*Note: CLCH from January 2018 became the provider for Wandsworth health visiting services and from October 2018 will be the provider for Wandsworth school nursing services.*

3.11 St George’s University Hospital NHS Foundation Trust:

3.12 The Wandsworth CCG 2016/17 annual report identified the following as areas of improvement for the Trust in 2017/18:

• Improve training and supervision compliance - PREVENT.
• Attend MSCB Challenge Panel Section 11.
• Progress Child Protection Information Service (CPIS).

3.13 The Trust is reviewing the model of safeguarding supervision and as such reporting on compliance has not been submitted. Training compliance relating to St George’s University Trust captured in the table below:

Table 3: St Georges University Hospital NHS Foundation Trust Safeguarding children training compliance 2017/18:
<table>
<thead>
<tr>
<th>Safeguarding Children training compliance %</th>
<th>Q1 2017/18</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td>89%</td>
<td>87%</td>
<td>90%</td>
<td>91%</td>
</tr>
<tr>
<td>Level 2</td>
<td>82%</td>
<td>79%</td>
<td>81%</td>
<td>84%</td>
</tr>
<tr>
<td>Level 3</td>
<td>87%</td>
<td>85%</td>
<td>85%</td>
<td>87%</td>
</tr>
<tr>
<td>Level 4</td>
<td>100%</td>
<td>100%</td>
<td>No data</td>
<td>100%</td>
</tr>
<tr>
<td>PREVENT WRAP</td>
<td></td>
<td></td>
<td>32%</td>
<td>52%</td>
</tr>
</tbody>
</table>

3.14 The Trust have participated in the WSCB Section 11 process and CPIS (Child Protection Information System) is now ‘live’ in the Emergency Department (Tooting).

3.15 The OFSTED inspection of Wandsworth LA Children services (report published July 2018) highlighted areas for improvement with regard to the health of looked after children. Wandsworth CCG will be working closely with both the LA and Trust, who are commissioned to provide looked after children services, to ensure the recommendations are progressed and looked after children receive a service which is compliant with statutory guidance and achieves positive health outcomes.

3.16 The CQC inspection report (July 2018) highlighted safeguarding issues which require action during 2018/19. The Trust has in place a CQC action plan which includes these.

3.17 The following areas requiring improvement in 2018/19:

- To report on and improve safeguarding children supervision compliance.
- To progress areas of concern relating to safeguarding highlighted in the CQC report.
- To report on and progress the areas of improvements as highlighted by the OFSTED inspection report.

3.18 Epsom and St Helier University Hospital NHS Trust (ESTH):

3.19 Actions identified in the Merton 2016/17 annual report for 2017/18 were:

- Improve training and supervision compliance.
- Attend MSCB Challenge Panel Section 11.
- Progress CPIS.

The Trust has implemented CPIS using the summary care record access (SCRa) method. However, an integrated system may be possible in the future. Safeguarding training and supervision compliance remains an area for improvement. The Trust presented their section 11 at the MSCB Section 11 Challenge Panel.

Table 4: Epsom and St Helier University Hospital NHS Trust Safeguarding training compliance 2017/18:
### Safeguarding Training Compliance

<table>
<thead>
<tr>
<th>Level</th>
<th>Q1 2017/18</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>77%</td>
</tr>
<tr>
<td>Level 2</td>
<td>80.3%</td>
<td>83%</td>
<td>82%</td>
<td>77%</td>
<td>95%</td>
</tr>
<tr>
<td>Level 3</td>
<td>83%</td>
<td>83%</td>
<td>84%</td>
<td>79%</td>
<td>95%</td>
</tr>
<tr>
<td>Level 4</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>95%</td>
</tr>
</tbody>
</table>

3.20 The Trust CQC overall rating (report May 2018) is ‘requires improvement’ and it should be noted the lead commissioner is Sutton CCG.

Link: [https://www.cqc.org.uk/provider/RVR](https://www.cqc.org.uk/provider/RVR)

3.21 The following areas require improvement in 2018/19:

- Improve safeguarding training and supervision compliance.

### Conclusion and Priorities for 2018/19:

4.1 Merton and Wandsworth CCG from February 2017 have in place a team of safeguarding professionals that cover both Boroughs; however systems and reporting processes require alignment. Safeguarding reporting has transitioned to joint Merton and Wandsworth reports with the exception of the Looked After Children reporting which remain borough specific given the annual report is received by the LA Corporate Parenting Panel.

4.2 The CCG safeguarding governance arrangements are shared with implementation of the Merton and Wandsworth Safeguarding Committee on 30th October 2017. Governance and reporting arrangements have been established, however work to align policies and procedures remains in progress.

4.3 The implementation of the shared safeguarding arrangements will require monitoring in regard to capacity of the safeguarding professionals given the workload of two boroughs and specifically the additional complexity of Wandsworth. A review of the new arrangements is to be undertaken in 2018/19.

4.4 The move from LSCBs to Safeguard Partnerships brought about under the Children and Social Work Act 2017 makes to the CCG an equal partner with the LA and police in the oversight of safeguarding children arrangements. The Designated Safeguarding Professionals will be working to provide the CCG with expert advice as to this transition. This is an area of work is identified by NHSE as a priority for 2018/19.


4.5 The implementation of CPIS in unscheduled healthcare settings has in 2017/18 moved forward, however both Merton and Wandsworth LA are not ‘live’ on the system hence the benefits projected have not been fully achieved. This will be an area of work for the CCGs in 2018/19.
4.6 The training of staff as relating to safeguarding children and PREVENT continues to be an area of improvement and this is echoed in the NHSE Safeguarding Update (2018) and one of the NHSE priorities for 2018/19. An additional area of training that requires consideration, and as not yet mandatory, is that of modern slavery and people trafficking. Training compliance of the CCGs workforce and that of commissioned services will continue to be an area for improvement in 2018/19.

4.7 The embedding of the Female Genital Mutilation Information System (FGM-IS) is a priority for NHSE. FGM-IS is a national IT system that allows healthcare professionals across England to systematically share information about a family history of FGM. This will be an area of work for the CCGs to progress in partnership with NHS Digital, NHSE and maternity units.

4.8 Child sexual abuse and exploitation remain a high priority across London. The Child House Project has been taken forward in North London with the opening of The Lighthouse, a dedicated specialist resource for children and young people. There is no such provision in South London, however the NSPCC as part of the South West London CSA Hub is commissioned to provide support for a period of 6 – 8 weeks following a referral. The inequity of service across London for children and young people is an area of concern and requires further exploration in 2018/19.