

HEALTH AND WELL-BEING BOARD April 2014

Title of paper:	NCSCB AND NCASPB BUSINESS PLANS 2014/15	
Director(s)/ Corporate Director(s):	Corporate Director for Children and Adult Services	Wards affected: All
Report author(s) and contact details:	Paul Burnett, Independent Chair of the Nottingham City Safeguarding Children Board and Adult Safeguarding Partnership Board	
Other colleagues who have provided input:		
Date of consultation with Portfolio Holder(s) (if relevant)		
Relevant Council Plan Strategic Priority:		
Cutting unemployment by a quarter		<input type="checkbox"/>
Cut crime and anti-social behaviour		<input type="checkbox"/>
Ensure more school leavers get a job, training or further education than any other City		<input type="checkbox"/>
Your neighbourhood as clean as the City Centre		<input type="checkbox"/>
Help keep your energy bills down		<input type="checkbox"/>
Good access to public transport		<input type="checkbox"/>
Nottingham has a good mix of housing		<input type="checkbox"/>
Nottingham is a good place to do business, invest and create jobs		<input type="checkbox"/>
Nottingham offers a wide range of leisure activities, parks and sporting events		<input type="checkbox"/>
Support early intervention activities		<input checked="" type="checkbox"/>
Deliver effective, value for money services to our citizens		<input type="checkbox"/>
Summary of issues (including benefits to citizens/service users):		
The Safeguarding Boards key purposes are to secure effective safeguarding arrangements for the citizens of Nottingham and to secure effective co-ordination between all agencies responsible for safeguarding.		
Recommendation(s):		
1	To consider any further additions or amendments to the Business Plan for consideration for consideration by the Safeguarding Boards.	
2	To agree the Business Plans	
3	To identify any issues arising from the Business Plans that will be built into the Strategic Commissioning Plan formulated by the Health and Well-Being Board.	
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1. REASONS FOR RECOMMENDATIONS

- 1.1 It has been agreed that the Health and Well-Being Board will be a partnership board that contributes to the development of the Safeguarding Boards Business Plan as part of the annual consultative process. In addition, it has been agreed that the Health and Well-Being Board will consider how the key objectives in the

Safeguarding Boards Business Plan will be built into their own Strategic Commissioning Plans

2. BACKGROUND (INCLUDING OUTCOMES OF CONSULTATION)

- 2.1 It is a statutory requirement that the Nottingham City Safeguarding Children Board produce an annual Business Plan setting out its key objectives and priorities for action for each financial year. Whilst it is not a statutory responsibility to produce a Business Plan for the Safeguarding Adult Board it has been agreed that this should be produced in Nottingham City as a matter of good practice. This is the second time that the Business Plans have been combined into one document to reflect the alignment between the two boards that was put in place in 2012/13.
- 2.2 The key priorities for the Business Plan 2014/15 were agreed at the annual Development Day held by the Boards in January 2014. The formulation of this Business Plan has been undertaken with the engagement of members of both Boards and other stakeholders. It aims to articulate the key improvement objectives that will underpin our work in the period 2014-15 and, most importantly, to set out the actions that will be taken to address these priorities. In addition we have this year incorporated into the Plan the quality assurance and performance management indicators that will be used to evaluate the impact of our work under each priority objective.
- 2.3 The increased emphasis performance indicators and specific actions is also intended to ensure that we are more explicit about the outputs, outcomes and impact that the Boards intends to achieve. This we believe will strengthen our ability better to quality assure, performance monitor and risk manage the work of the Boards and their impact on safeguarding service delivery and on safeguarding outcomes for children, young people and adults.
- 2.4 The priorities in this Business Plan have been identified against a range of national and local drivers including:
- National policy drives to strengthen safeguarding arrangements and the roles of LSCBs and SABs – including revisions to Working Together, a move to statutory status for safeguarding adults boards, the outcomes of the Winterbourne View review;
 - Recommendations from regulatory inspections including the inspection undertaken by Ofsted in March 2014;
 - The outcomes of Serious Case Reviews and Serious Incident Learning Processes (SILPs) – emerging from both national and local reports;
 - Evaluations of the impact of previous Business Plans and analysis of need in Nottingham City;
 - Priorities for action emerging from Quality Assurance and Performance Management arrangements operated by both Boards;
 - Responses to the views of stakeholders including the outcomes of engagement activities with children and young people;
 - Best practice reports issued by Ofsted, ADCS and ADASS;
 - The JSNA for Nottingham City.
- 2.5 The key priorities identified for the Business Plan 2014-15 are:
- Priority 1: To be assured that 'Safeguarding is Everyone's Responsibility'

Priority 2a: To be assured that children and young people are safe across the child's journey

Priority 2b: To be assured that adults in need of safeguarding are safe

Priority 2C: To be assured that safeguarding services are effectively coordinated across children and adult services – applying the 'Think Family' concept

Priority 3: To be assured of the quality of care for any child not living with a parent or someone with parental responsibility

Priority 4: To be assured that our Learning and Improvement Framework is raising service quality and outcomes for children, young people and adults

Priority 5: To be assured that the workforce is fit for purpose

2.6 The Business Plan for 2014/15 is attached as appendix 1 to this report and sets out both the quality assurance and performance management indicators that will be applied to assess impact against each of the priorities and the actions that will be undertaken to support the achievement of these impacts and outcomes.

2.7 The draft Business Plan was considered by the Executive of the Health and Well-Being Board at its meeting on 4th March 2014. Comments made at that meeting have been incorporated into the draft of the Business Plan now attached.

3. OTHER OPTIONS CONSIDERED IN MAKING RECOMMENDATIONS

3.1 There are no other options presented.

4. FINANCIAL IMPLICATIONS (INCLUDING VALUE FOR MONEY/VAT)

4.1 Both the NCSCB and NCASPB are funded through a budget to which all statutory partners contribute through a formula agreed by the Board. These contributions have been agreed and there are no financial implications specifically for the Health and Well-Being Board.

5. RISK MANAGEMENT ISSUES (INCLUDING LEGAL IMPLICATIONS AND CRIME AND DISORDER ACT IMPLICATIONS)

5.1 The NCSCB and NCASPB operate their own risk registers that are monitored by both the Quality Assurance Sub-Group and the Operational Management Group.

6. EQUALITY IMPACT ASSESSMENT

Has the equality impact been assessed?

Not needed (report does not contain proposals or financial decisions)

No



Yes – Equality Impact Assessment attached



Due regard should be given to the equality implications identified in the EIA.

7. LIST OF BACKGROUND PAPERS OTHER THAN PUBLISHED WORKS OR THOSE DISCLOSING CONFIDENTIAL OR EXEMPT INFORMATION

7.1 The Business Plan is attached as Appendix 1.

8. PUBLISHED DOCUMENTS REFERRED TO IN COMPILING THIS REPORT

8.1 The NCSCB Business Plan is required by Working Together 2013 published by the Department for Education

NOTTINGHAM CITY NCSCB AND NCASPB

Business Plan Priorities 2014/15

Priority 1: To be assured that 'Safeguarding is Everyone's Responsibility'

Priority 2a: To be assured that children and young people are safe

Priority 2b: To be assured that adults in need of safeguarding are safe

Priority 2c: To be assured that services are effectively coordinated

Priority 3: To be assured that our Learning and Improvement Framework secures a workforce fit for purpose and is raising service quality and safeguarding outcomes for children, young people and adults

CROSS CUTTING

- Safeguarding services are co-ordinated
- The voices of children and adults are heard
- The voices of staff are heard
- Sub-regional and regional co-ordination will be maximised – specifically to assist partners who work across local authority boundaries
- Effective communication will underpin all Board activity

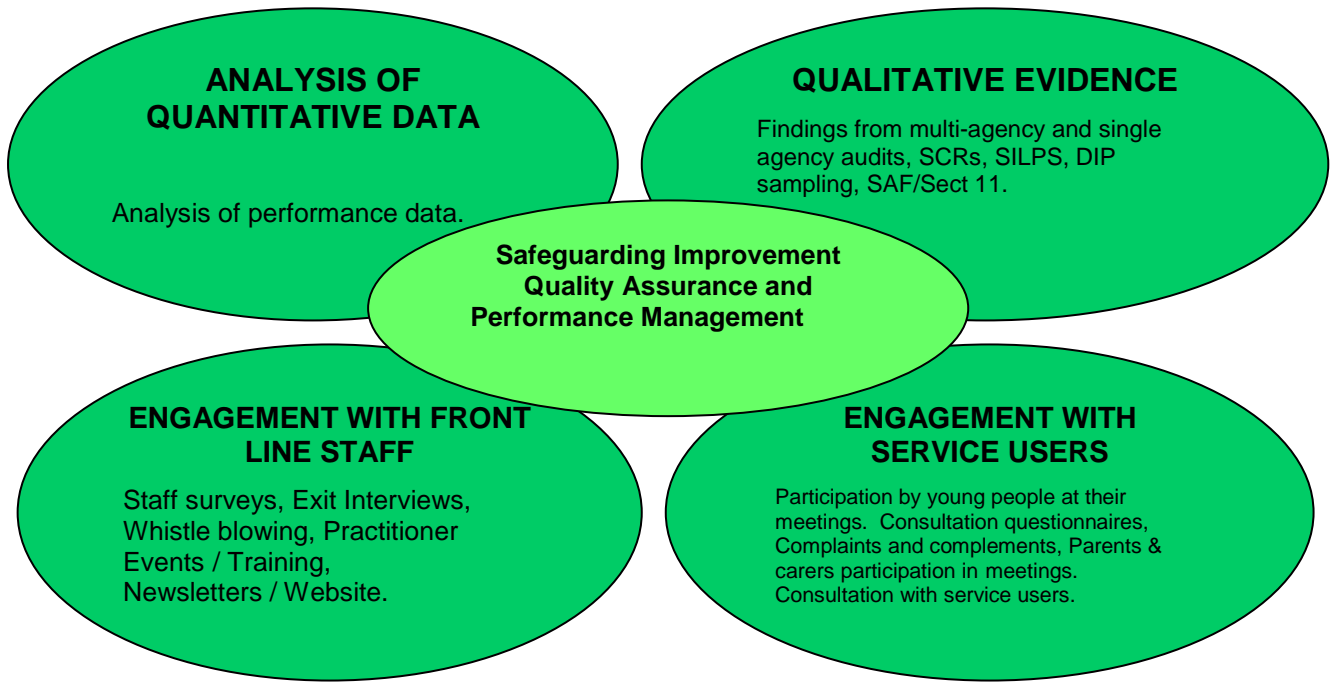
Priority 1: To be assured that 'Safeguarding is Everyone's Responsibility'

The focus of this priority is on partnership and individual agency effectiveness in safeguarding delivery and developing and embedding outcomes focus across the partnerships.

Outcomes sought in 2014/15.

- 1.1** Ensure Boards' and partner agency compliance with Working Together 2013 (WT13) and the Care Bill.
- 1.2** Ensure full agency compliance in Section 11 and SAF Audit processes.
- 1.3** Ensure that the Board, OMG and Subgroups:
 - a. have appropriate and regular attendance rates,
 - b. have capacity to deliver Business Plan expectations,
- 1.4** The Board drives partnerships and partner agencies to own, prioritise, resource, improve and positively impact on safeguarding.
- 1.5** The Board receives management information to evidence, scrutinise and challenge performance so that it knows the safeguarding strengths and weaknesses of agencies, both individually and collectively, and the safeguarding outcomes for service users.
- 1.6** Secures the effective implementation of new practice guidance issued in 2014.
- 1.7** Formulate and implement the Information Sharing Protocol.
- 1.8** Safeguarding roles and responsibilities and outcomes are explicit in the commissioning, contracting, monitoring and review of services.
- 1.9** The 'voice' of children, young people, adults and practitioners is heard and acted on across all priorities.

We will evidence our performance on the above as follows:



Priority 2a: To be assured that children and young people are safe across the child's journey including the transition to adult services.

2a.1 The Local Authority Assessment Protocol is effectively implemented and secures impact.

2a.2 Thresholds for safeguarding children are clear, understood and consistently applied across the Partnership.

2a.3 That children receive the help and support they need at the earliest possible stage.

2a.4 That all children requiring protection and/or care have had the benefit of early help and intervention.

2a.5 That children subject to child protection plans and those in need have high quality multi agency support that reduces risks.

2a.6 Children at high risk/vulnerable are being identified and risks managed to secure positive outcomes. The groups that we have prioritised for 2014/15 are: CSE; Missing; Domestic Violence/Abuse; Self-Harm.

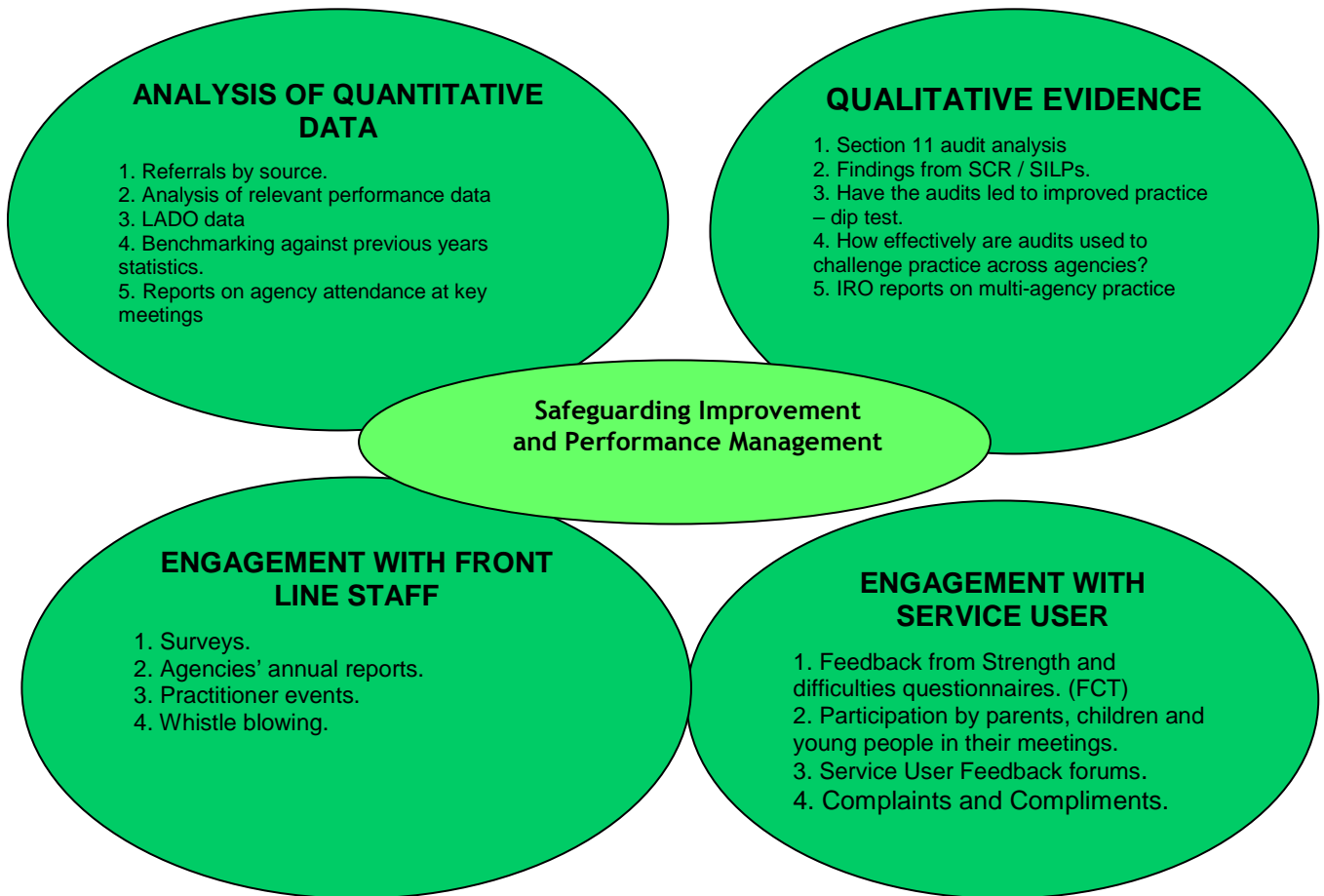
2a.7 Effective transitions from children to adult services where appropriate.

2a.8 Children/young people who are privately fostered are identified and supported.

2a.9 The workforce has capacity to deliver effective safeguarding.

2a.10 Adults who are assessed as posing risk to children and young people in need of safeguarding are effectively managed through MAPPA and MARAC and that risk to others is mitigated.

**Safeguarding Improvement
Quality Assurance and Performance Management**



Priority 2b – To be assured that adults in need of safeguarding are safe

2b.1 Vulnerable adults are receiving the support they need at the earliest possible stage and any safeguarding concerns are appropriately identified and referred.

2b.2 Thresholds for safeguarding adults are clear, understood and consistently applied.

2b.3 Quality and impact of single agency provision to adults in need of safeguarding.

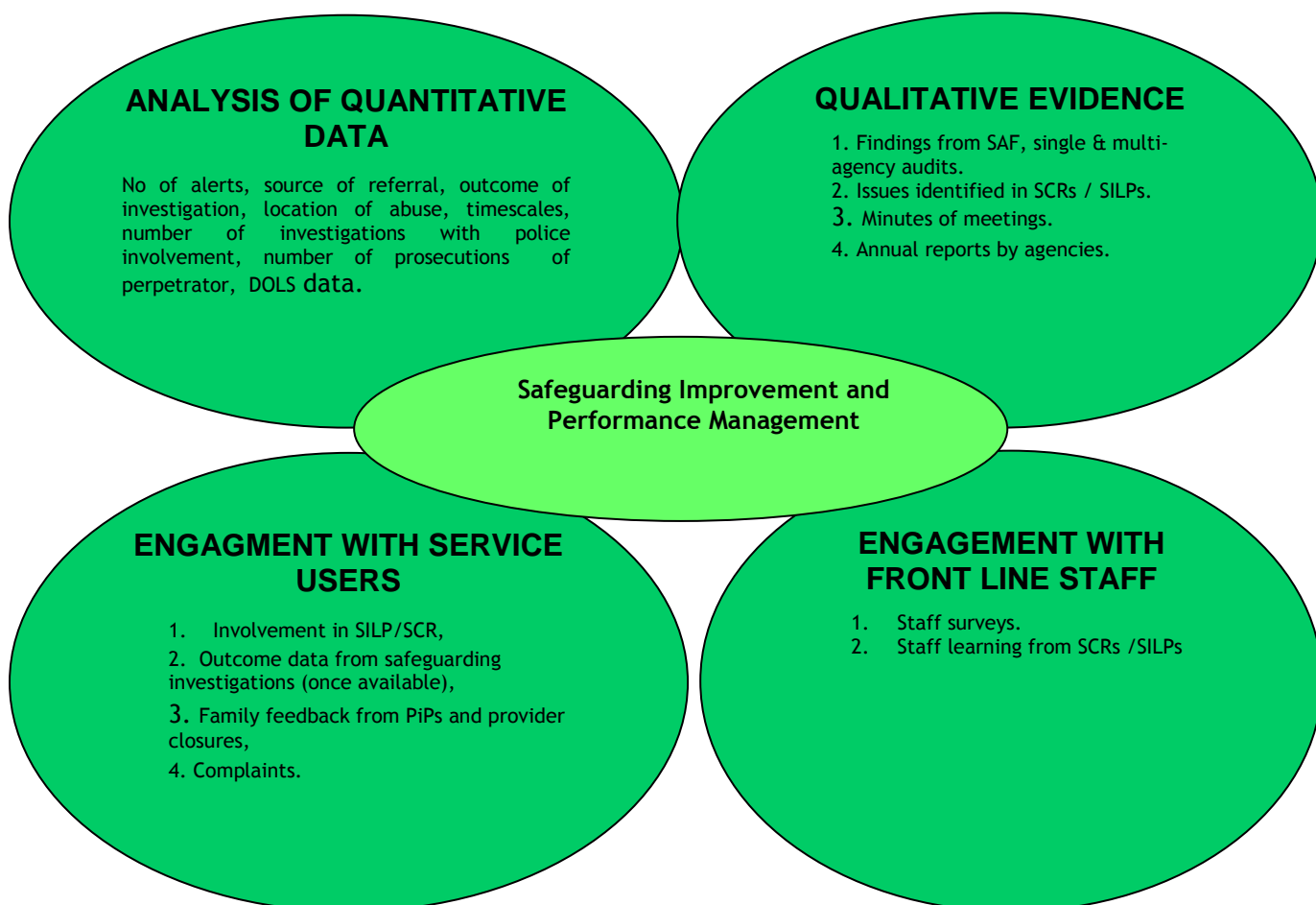
2b.4 Quality and impact of multi-agency provision to adults in need of safeguarding.

2b.5 Improved outcomes are evident in areas previously identified as risk. The groups that we have prioritised for 2014/15 are:

- c. those receiving self-directed support and personal health budgets & those adults living with or receiving services from registered providers;
- d. those affected by MCA/DoLS
- e. those experiencing domestic abuse;

2b.7 The workforce has capacity to deliver effective safeguarding.

Safeguarding Improvement and Performance Management

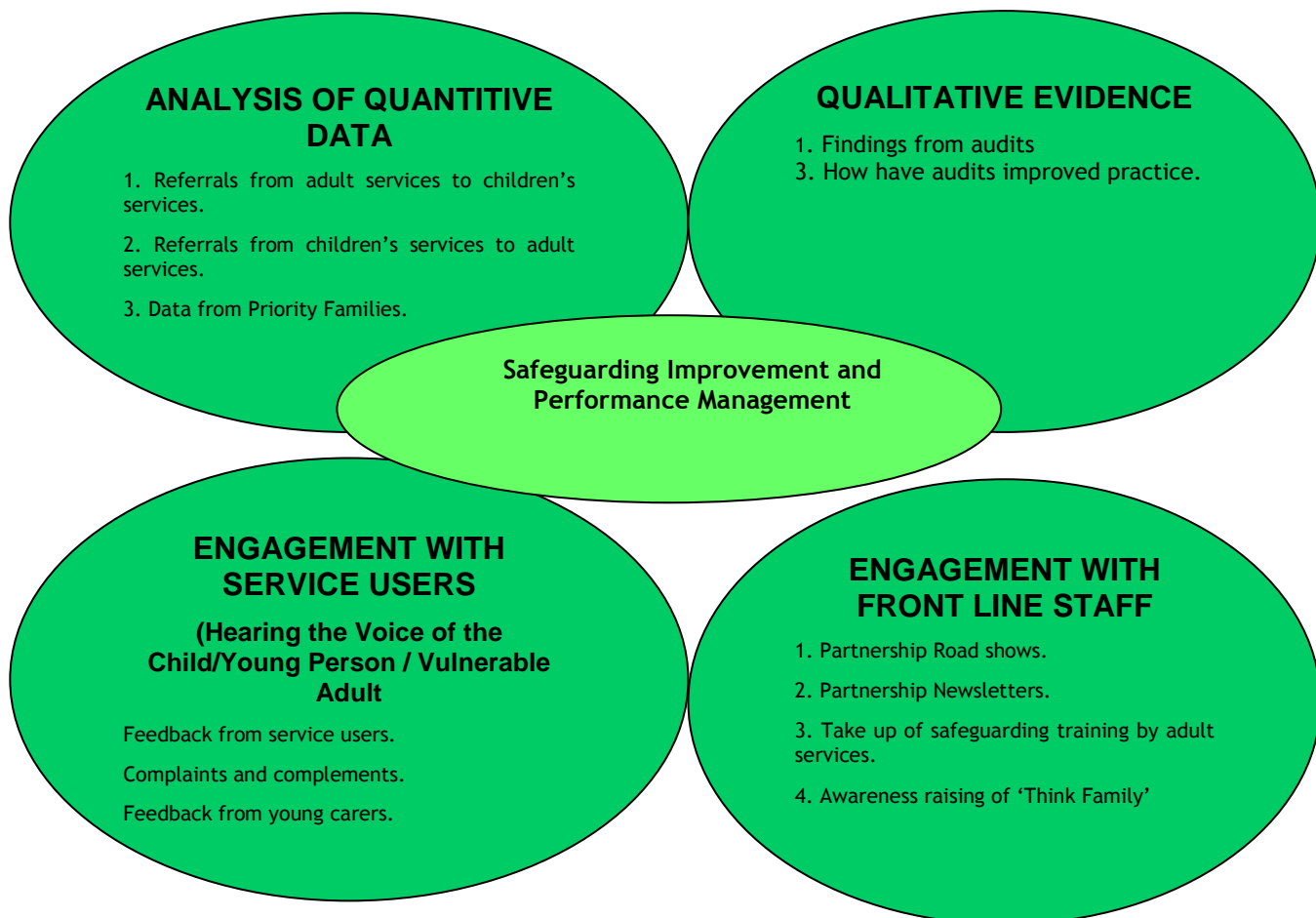


Priority 2c – To be assured that safeguarding services are effectively coordinated across children and adult services – applying the ‘Think Family’ concept

2c.1 Adult services to consistently consider the safeguarding of children in households where they are working with an adult and make referrals for support and intervention where necessary.

2c.2 Children’s services to consistently consider the safeguarding of adults in households where they are working with children and make referrals for support and intervention where necessary.

2c.3 Services that work with “whole” families are effectively coordinated (e.g. **Priority Families**) and secure added value in ensuring and co-ordinating effective safeguarding.



Priority 3: To be assured that our Learning and Improvement Framework secures a workforce fit for purpose and is raising service quality and safeguarding outcomes for children, young people and adults.

How we learn, improve and test competency

3.1 Ensure learning from national, regional and local SCRs and other review/audit processes is incorporated into the practice of partner agencies and the partnership as a whole.

3.2 Ensure the effectiveness of CDOP and lessons from child deaths are understood and consistently acted upon.

3.3 Review safeguarding procedures and practice guidance to ensure they are 'fit for purpose' and reflect current learning and best practice.

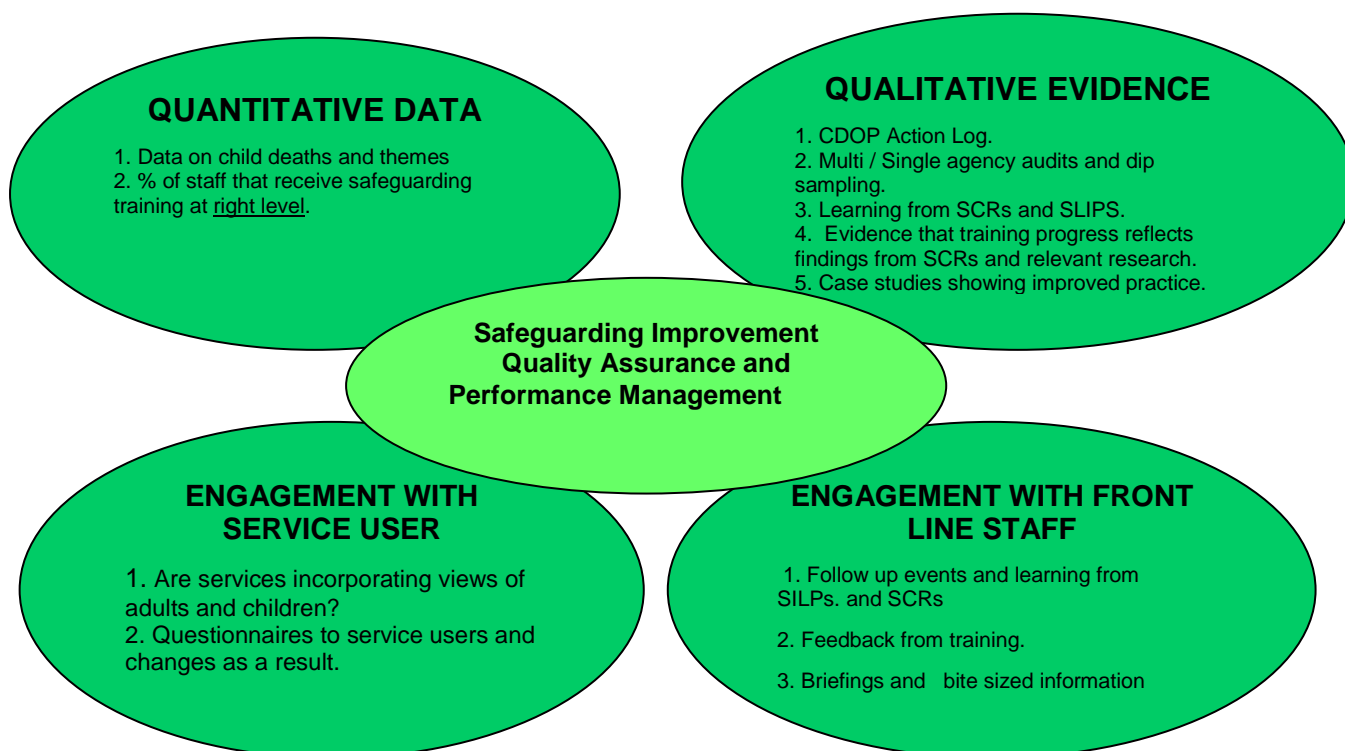
3.4 Ensure the communication and engagement strategy is fit for purpose in order to secure awareness of safeguarding issues and the responsibilities of the Boards' partner agencies and the wider community in safeguarding.

3.5 Establish a learning and improvement framework for adults.

3.6 Monitor and evaluate the effectiveness of training and development in terms of the impact on the quality of safeguarding practice and outcomes for service users.

3.7 Workforce is safely recruited.

3.8 Allegations made against people who work with children and adults are dealt with effectively.



ACTION PLANS

PRIORITY 1: To be assured that safeguarding is everyone's responsibility

No.	CAB	What do we want to achieve?	How are we going to do it?	Who will lead?	How will we know we have achieved our goal?	When are we going to achieve this?	Comment on Progress	RAG rating
1.1	B	Boards' and partner agency compliance with Working Together 2013 (WT13) and the Care Bill	<p>Ensure that Board is compliant with Working Together 2013 and any new relevant guidance.</p> <p>Monitor the impact of the updated Governance Document within the Board, Operational Management Group (OMG), Sub Groups.</p>	Service Manager, Board and Partnerships	Robust challenge, evidence of impact gathered, fit for purpose attendance at meetings.	June 2014 Ongoing		
1.1	B	“ “	Revise Section 11 framework to reflect WT2013 and improve agency safeguarding processes and outputs.	LSCB Service Manager QA Sub-Group	Section 11 Audit revised	May 2014		
1.1	B	“ “	<p><u>Care Bill</u></p> <p>Task and Finish Group created to determine what action is required to secure compliance when the Bill is passed.</p>	Care Bill Task and Finish Group	Actions identified by the Task and Delivery Group have been achieved.	Insert		
1.2	B	Ensure full agency compliance in Section 11 and SAF Audit processes	<p>All agencies to undertake Section 11 / SAF audit for 2014</p> <p>Compare outcomes of audits 2012 to audit 2014 to evaluate change and improvement.</p>	<p>QA Sub Group</p> <p>Service Manager and officers</p>	<p>All agencies have completed Section 11 / SAF</p> <p>Findings reported to Board.</p>	<p>1st July 2014</p> <p>30th Sept 2014</p>		

1.3	B	Ensure that the Board, OMG and Subgroups have appropriate and regular attendance rates	Maintain register of attendance and present quarterly analysis of attendance to OMG/Board.	Board Officers/Service Manager	Full attendance at appropriate level.	Ongoing Monitoring / Reporting		
1.3a	B	Have capacity to deliver Business Plan expectations.	Ensure appropriate representation and participation of agencies at subgroups and OMG.	LSCB Service manager and Subgroup Chairs	Sub groups complete work plans.	insert		
1.4	B	The Board drives partnerships and partner agencies to own, prioritise, resource, improve and positively impact on safeguarding	Constructive challenge on areas for development and under performance	Board OMG and Sub-groups	Evidence of challenge in minutes of meetings Specific changes relating to the challenges made.	Ongoing through the year.		
1.5	B	The Board receives management information to evidence, scrutinise and challenge performance so that it knows the safeguarding strengths and weaknesses of agencies, both individually and collectively, and the safeguarding outcomes for service	Analysis of performance data and findings from single and multi-agency audit to be reported to Board to get a picture of safeguarding practice on a quarterly – including: <ul style="list-style-type: none"> • Bench marking with statistical neighbours where available. • Trend Data • Early emerging themes arising from SCRs / SILPs. 	Board Service Manager and Officers supported by Chairs of QA and Serious Case Review Sub group chairs and agency leads	Analytical report to Board.			

		users.						
1.5	B	“ “	This information is scrutinised and challenged by the OMG and Board.	OMG & Board	Scrutiny and challenge is evidenced in minutes. Impact of such is evidenced in minutes. Board has full picture of quality of safeguarding practice across agencies	Ongoing through the year.		
1.6	C	Secure the effective implementation of new practice guidance issued in 2014.	Ensure that new Practice Guidance is used and utilised through feedback from staff at all levels. Practice guidance to inform audit programme of single and multi-agency audits. Evidence of impact gathered through audit.	Board service manager / Officers. OMG / Board	Report to Board on progress and findings of audit.	Quarterly feedback to Board.		
1.7	B	Formulate and implement the Information Sharing Protocol.	Task and Finish Group to progress and ensure fitness for purpose of information sharing protocol.	Independent Chair led by Task and Finish Group	Information is shared effectively for multi-agency audits and review processes. Evidenced in audits.			
1.8	B	Safeguarding roles and responsibilities and outcomes are	Expectations regarding safeguarding to be included in all commissioning and contracting arrangements.	Board Manager to inform Commissioning	Dip sampling of contracts and commissioning	Ongoing throughout the year.		

		explicit in the commissioning, contracting, monitoring and review of services across agencies.		Departments QA subgroup / Board Officer.	processes. Dip sampling of contracts by commissioning and findings reported to QA subgroup.			
1.9	B	The 'voice' of children, young people and adults is heard and acted on	Evidence based Feedback from Social care and Partner agencies. Feedback from Participation Offers across agencies received.	Board Partner Agencies QA Sub Group	Report received from agencies assuring that the voices of service users are heard and acted on.	Received quarterly.		
1.9	C		Analysis CAF questionnaires	Lead of Family & Community Team	Report to Board analysing CAF questionnaires	Received quarterly.		
1.9	B		Feedback from Complaints Officers across all agencies.	Complaints departments in partner agencies/ OMG	Improved practice as a result of themes arising from complaints made by children and adults reported to OMG	Received quarterly.		

ACTION PLANS

Priority 2a: To be assured that children and young people are safe across the child's journey

No.	CAB	What do we want to achieve?	How are we going to do it?	Who will lead?	How will we know we have achieved our goal?	When are we going to achieve this?	Progress Review	RAG rating
2a.1	C	Local authority Assessment Protocol is effectively implemented and secures impact	Reports from social care and other agencies that show the assessment protocol is now in place.	Head of Social Care	Findings from single agency audits to show that the assessment protocol has been implemented.	Quarterly throughout the year		
2a.1	C	“ “	Report of analysis of re-referrals.	Head of Social Care	Decrease in re-referrals.	Bi annual report to Board.		
2a.2	C	Thresholds for safeguarding children are clear, understood and consistently applied across the Partnership	Review of Family Support Strategy and Pathway, publication and implementation. Feedback from individual agencies. Feedback from escalations.	Quality & Commissioning Head of Social Care Head of Social Care.	Children, including children in need, receive support at the right level and this is evidenced in single and multi-agency audits.			
2a.2	C	“ “	All training materials is up-to-date and reflects the new thresholds.	Training subgroup	Training materials fit for purpose and available	Bi annual checks.		
2a.3	C	That children receive the help and support they need at the earliest possible stage	Receive bi monthly analysis reports to OMG of early help data.	QA subgroup/ Children's partnership Board Head of Family & Community	Data and audit will show that early help was put in place.			

			Findings and action plans from SCRs & SILPs	SCR Sub group	Report on findings			
2a.4	C	That all children requiring protection and/or care have had the benefit of early help and intervention.	Undertake themed and single agency audits.	“ “	Findings from audits will show that children in need of protection were identified early or that early help prevented concerns escalating.			
2a.4	C	“ “	Findings and action plans from SCRs & SILPs	SCR Subgroup	Report on findings			
2a.5	B	That children subject to child protection plans and those in need have high quality multi-agency support that reduces risks.	Monitor multi-agency engagement and quality of practice through multi-agency audits.	QA subgroup	Reduction in the numbers of re-registrations.			
2a.5	C	“ “	Findings and action plans from SCRs & SILPs	SCR Subgroup	Report on findings			
2a.5	B	“ “	Ensure single agency audits focus on safeguarding and are reported to the Board.	QA subgroup	Report on findings.			
2a.5	B		IRO report to Board on a six monthly basis.	Principal Manager –	IRO report to Board in quality of multi-agency			

		“ “		Children’s Quality Assurance	practice.			
2a.6	C	Children at high risk/vulnerable are being identified and risks managed to secure positive outcomes. The groups that we have prioritised for 2014/15 are: CSE; Missing; Domestic Violence/Abuse; Self-Harm;	Reports of evidence of impact from subgroups.	CSE Subgroup Missing Subgroup DV subgroup	Findings from reports and audits show that children affected by these issues are identified and risks are appropriately managed.			
2a.7	C	Effective transition from children’s to adults services where appropriate.	Assess the impact of actions taken following relevant SCRs through audit.	QA subgroup Cross Authority Transition LSCB Service Manager / Board Officer	Findings from assessment reported to the Board.			
2a.7	B	“ “	Ensure that learning from local and national SCRs are disseminated.	SCR Sub group	Evidence of dissemination. Evidence of impact of learning.	Dip testing for specific learning issues.		
2a.7	C	“ “	Request report on transitions from children’s services where they meet the thresholds for adults services.	Lead for CAMHS/ Lead for Disabled Children	Evidence of how effective transitions are with action plans for identified barriers.	Analysis in requested reports bi annually.		
2a.8	C	Children/young people who are privately fostered are identified	Receive six monthly report from social care, examining the number	Service manager (Private	Received report Increase in number of	Analysis of findings / Action		

		and supported.	of children who are privately fostered.	fostering)	privately fostered children identified.	planning bi annually.		
2a.8	C	“ “	Test professionals understanding of private fostering.	Service manager (Private fostering)	Report findings	Bi annually.		
2a.9		The workforce has effective capacity to deliver effective safeguarding.	Be assured that agencies have sufficient capacity to undertake safeguarding practice effectively. Report on any capacity issues identified in SCRs and SILPs.	Board Partner agencies/ Board Service manager SCR Sub group	Six monthly report to Board if any issue regarding capacity impacts on safeguarding work. Reports received and subsequent actions tracked.	Bi annually.		
2a.10	B	Adults who are assessed as posing risk to children and young people in need of safeguarding are effectively managed through MAPPA and MARAC and that risk to others is mitigated	Board to consider the outcome from the CARDA assessment of MARAC.	MARAC/ Board	Report received and any actions put in place to address identified shortfalls.			
		“ “	Report from MARAC on engagement by professionals in the MARAC process	MARAC/ Board	Report received and any actions put in place to address identified shortfalls.			
		“ “	Board to consider report on effectiveness of MAPPA	Lead for MAPPA / Board	Report received and any actions put in place to address identified shortfalls.			

		“ “	Report from MAPPA on engagement by professionals in the MAPPA process.	Lead for MAPPA / Board	Report received and any actions put in place to address identified shortfalls.			
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ACTION / SUB GROUP WORK PLANS

Priority 2b - To be assured that adults in need of safeguarding are safe

No.	CAB	What do we want to achieve?	How are we going to do it?	Who will lead?	How are we going to know that we have achieved? this	When are we going to achieve this?	Progress Review	RAG rating
2b.1	A	Vulnerable adults are receiving the support they need at the earliest possible stage and any safeguarding concerns are appropriately identified and referred.	Examine support through single and multi-agency audits.	QA subgroup	Data and audit will show appropriate support and intervention was put in place.	Monitoring over 12 month period through dip testing.	Bi annually.	
2b.2	A	Thresholds for safeguarding adults are clear, understood and consistently applied across the partnership.	Threshold training in place with good take up across agencies.	Training subgroup	Report from subgroup on attendance.			
2b.2a	A	“ “	Targeted agency attendance at training.	Training subgroup	Updated report.			
2b.2b	A	“ “	Analysis of source of referrals.	Head of Adult Social Care / LSCB Board Manager. QA subgroup	Report to the Board to be assured that practitioners, providers and any other referrers are aware of referral processes.	Bi annual reporting.		
2b.2c	A	“ “	Single agencies to report to Board on monitoring of their own safeguarding referrals.	Board Partner agencies/ QA subgroup	Data provided by partner agencies with analysis.	Bi annual reporting.		

	A	“ “	Implement a programme of single agency themed audits to ensure thresholds are being applied.	QA subgroup	Findings from audits to show that thresholds are being consistently and appropriately applied.	Bi annual reporting.		
2b.3	A	Quality and impact of multi-agency and single agency provision to adults in need of safeguarding	Ensure multi agency and single agency audits are completed and results reported to NCASPB.	QA subgroup	Findings from audits Action plans to address areas of improvement	Bi annual reporting.		
		“ “	Review the data on adult safeguarding to capture relevant information.	Director of Adult Social QA subgroup	Report on analysis of data presented.			
		“ “	Analyse the data on adult safeguarding	Head of Adult Services /LSCB Board Manager	Report on analysis of data presented.			
2.4	A	Quality and impact of single agency provision to adults in need of safeguarding.	Initiate SCRs and SILPs as required, ensuring criteria is met.	SCR subgroup	Quarterly report to Board on activity and findings.			
2.4a		“ “	Learning from reviews to be disseminated appropriately.	QA subgroup	Quarterly report to Board on activity and findings.			
2.4b		“ “	Recommendations to be implemented and impact evaluated.	QA subgroup	Quarterly report to Board on activity and findings.			
		“ “	Multi-agency audit of a Provider investigation	QA subgroup	Quarterly report to Board on activity and findings.			
2.5	A	Improved outcomes are	Single agencies to audit	QA subgroup				

		evident in areas previously identified as risk. The groups that we have prioritised for 2014/15 are:	that safeguarding is embedded in policy, contracts and quality monitoring process and provide assurance to the Board.					
2.5a	A	a. those receiving self-directed support and personal health budgets & those adults living with or receiving services from registered providers	Ensure that recommendations and actions from SCRs and SILPs to be implemented effectively,	SCR subgroup/QA Subgroup	Findings from multi-agency and single agency audits and dip-testing.			
2.5		b. those affected by MCA/DoLS	Agencies to provide evidence from single agency audits that MCA is considered in safeguarding interventions and applied and recorded appropriately.	MCA/Dols subgroup	Findings from audit reported.			
2.5		“ “	Analysis of data, highlighting areas of concern and implementing remedial action as required. Completion of the national and statutory return for Dols data.	MCA/Dols subgroup	Action plans to address identified issues. Quarterly report to Board.			
2.5		“ “	To be assured through audit that applications made for DOLs are appropriate.	MCA/Dols subgroup	Report on findings and action plan to address identified issues.			

		“ “	Co ordinate and respond to training needs identified to feed into training sub group.	MCA/Dols subgroup / Training subgroup	Appropriate training in place and taken up.			
2.5		“ “	Review of MCA policy and procedure.	Director of Adult Social Care / MCA / Dols subgroup.	Reviewed policy and procedure.			
2.5			Analysis of data, highlighting areas of concern and implementing remedial action as required. Completion of the national and statutory return for Dols data. To be assured through audit that applications made for DOLs are appropriate	MCA/Dols subgroup				
2.5			Coordinate and respond to training needs identified to feed into training subgroup.	MCA/Dols subgroup/				

			Review of MCA policy and procedure.	Director of Adult Social Care/ MCA/Dols subgroup				
2.5		Improved outcomes are evident in areas previously identified as risk. The groups that we have prioritised for 2014/15 are: c. those experiencing domestic abuse;	Board to consider the outcome from the CARDA assessment of MARAC.	MARAC/ Board	Report received and any actions put in place to address identified shortfalls.			
2.5		“ “	Report from MARAC on engagement by professionals in the MARAC process.					
2.5		“ “	Be assured through audits that Vulnerable adults are appropriately screened using the DASH risk assessment tool.	DV subgroup	Report findings of audit			
2.6	A	The workforce has capacity to deliver effective safeguarding	Be assured that agencies have sufficient capacity to undertake safeguarding practice effectively.	Board Partner agencies/ Board Service manager	Six monthly report to Board if any issue regarding capacity impacts on safeguarding work. Reports received and subsequent actions			

					tracked.			
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ACTION / SUB GROUP WORK PLANS

Priority 2C – To be assured that safeguarding services are effectively coordinated across children and adult services – applying the ‘Think Family’ concept

No.	CAB	What do we want to achieve?	How are we going to do it?	Who will lead?	How will we know we have achieved our goal?	When are we going to achieve this?	Progress Review	RAG rating
2c.1	B	Adult services to consistently consider the safeguarding of children in households where they are working with an adult and make referrals for support and intervention where necessary.	<p>Review services against recommendations from the Ofsted thematic inspection on joint working between adult and children’s services ‘What about the children’</p> <p>Seek feedback from young carers about their experience</p> <p>Examine referrals by source</p> <p>Audit adult cases to ensure the needs of children are considered</p> <p>Ensure adult services are trained in recognising safeguarding issues for children</p>	<p>Chair and Board service manager</p> <p>Report from relevant manager</p> <p>QA group/ Head of QA</p> <p>QA group/ Head of QA</p> <p>Training sub-group</p>	<p>Report to Board on extent to which recommendations are met</p> <p>Young carers will report positively/ action plan developed on areas for improvement</p> <p>Evidence of increasing number of referrals from adult services over the year.</p> <p>Findings from audits with action plans for areas for improvement</p> <p>Improved take up of training by adult services (need to set baseline and target-improve from what to what)</p>			

			Report on any relevant findings from SCRs and SILPs in relation to child - adult interface.	SCR sub group	Report to Board.			
2c.2	B	Children's services to consistently consider the safeguarding of adults in households where they are working with children and make referrals for support and intervention where necessary.	Ascertain numbers of referrals from children's services to adult services.	Head of Adults Social Care / LSCB Manager	Consider numbers and information received and report to the Board.			
		“ “	Audit children's cases to ensure the needs of adults are considered	QA group/ Head of Safeguarding and QA	Findings from audits with action plans for areas for improvement			
2c.3	B	Services that work with "whole" families are effectively coordinated (e.g. Priority Families) and secure added value in ensuring and co-ordinating effective	Report from Priority Families on their impact for children and adults Agencies are required to implement think family.	???	Receive report, discuss findings and any action plan for areas for improvement			

ACTION / SUB GROUP WORK PLANS

Priority 3: To be assured that our Learning and Improvement Framework secures a workforce fit for purpose and is raising service quality and safeguarding outcomes for children, young people and adults

No.	CAB	What do we want to achieve?	How are we going to do it?	Who will lead?	How will we know we have achieved our goal?	When are we going to achieve this?	Progress Review	RAG rating
3.1	B	Ensure learning from national, regional and local SCRs and other review/audit processes is incorporated into the practice of partner agencies and the partnership as a whole.	Effective dissemination of learning within Board and Partner agencies	QA Sub Group / Training Sub Group	Report from the sub group on how learning has been disseminated.			
3.1a	B	“ “	Board and Partner agencies to measure impact through multi-agency and single agency case file audits.	QA Subgroup	Practice is informed by the learning and tested through audit, and findings reported to Board. Evidence collated and shared at OMB/Board.			
3.2	C	Ensure the effectiveness of CDOP and that lessons from child deaths are understood and consistently acted upon	Themes and issues on the work from CDOP are identified and disseminated. Board and Partner agencies to measure impact through multi-agency and single agency case file audits	CDOP	Specific campaigns will increase public awareness of specific risks to children resulting in these specific risks reducing for children Audits will show that practice has changed or improved.			

3.3	B	Review safeguarding procedures and practice guidance to ensure they are 'fit for purpose' and reflect current learning and best practice.	Annual review and update of procedures.	Head of Safeguarding/ Board Service manager	Report to Board identifies changes and the expected impact on practice of these. The Board ratifies updated procedures and practice guidance.			
3.4	B	Implement the communication and engagement strategy to secure awareness of safeguarding issues and the responsibilities of the Boards' partner agencies and the wider community in safeguarding Discuss with Paul	Set up a communication and engagement task and finish group to ensure the implementation of the comms and engagement strategy. Create and disseminate a Board newsletter on a quarterly basis to raise the profile of the work of the Board Is this best use of time? What impact do we expect this to have? Discuss with Paul	Board service manager Comms and Engagement task and finish group				
3.5		Establish a learning and improvement framework for adults.		Training subgroup	Report on % of staff across agencies that have received safeguarding training at the right level.			
3.6		Monitor and evaluate the effectiveness of training and development in terms of the	Assess extent of access to safeguarding training	Training subgroup				

		impact on the quality of safeguarding practice and outcomes for service users. Ensure feedback loops are established following each training sessions.	and take up across agencies.					
3.6a		“ “	Seek examples of how practice has improved	Training subgroup	Identify examples of improved practice following training.			
3.6b		“ “	“ “	Training subgroup	Case file audits should show improved practice that links back to specific training.			
3.7	B	Workforce is safely recruited.	Sample HR files across agencies.	QA subgroup	Report to Board on any issues with action plans to address.			
3.8		Allegations made against people who work with children and vulnerable adults are dealt with effectively.	Board receives bi-monthly analysis reports of number of allegations and themes and issues raised.	OMG	Report received with recommendations and action to be taken.			
3.8a	C	“ “	“ “	OMG	Increase in LADO referrals			

