

## Oxfordshire Safeguarding Self-Assessment

This template incorporates the standards from the safeguarding self-assessment against the Children Act 2004 (known as the Section 11 audit) carried out by the OSAB as well as the standards developed by the LGA for Adult Services and published within the LGA Adult Safeguarding Improvement Tool.

This combined audit covers both safeguarding children and adults with care and support needs and adults at risk, recognising that most agencies attending the Safeguarding Boards provide services to both children and adults with care and support needs.

The standards are broken down into four areas:

1. Leadership, Strategy and Working Together
  - a. Senior management have commitment to the importance of safeguarding and promoting the welfare of children and adults with care and support needs
  - b. There is a clear statement of the agency's responsibility towards children and adults with care and support needs and this is available to all staff
  - c. Local Safeguarding Board Effectiveness
2. Commissioning, Service Delivery and Effective Practice
  - a. Service development takes into account the need to safeguard and promote welfare and is informed, where appropriate, by the views of children and adults with care and support needs & families
  - b. There is effective inter-agency working to safeguard & promote the welfare of children and adults with care and support needs
  - c. There is effective Information Sharing
  - d. Commissioning arrangements are robust, effective and cost-effective
  - e. Thematic Issue: Transport of children and adults with care and support needs
3. Performance & Resource Management
  - a. There is effective training on safeguarding & promoting the welfare of children and adults with care and support needs for all staff working with or, depending on the agency's primary functions, in contact with children and adults with care and support needs
  - b. Safer recruitment procedures including vetting procedures and those for managing allegations are in place
4. Outcomes for, and Experiences of, People Who Use Statutory Services
  - a. People's experiences of safeguarding

### Timescales and deadlines

The self-assessment will be circulated in autumn 2016 for **return by Friday 2<sup>nd</sup> December 2016**. All returns must be sent back to the OSCB team mailbox [oscb@oxfordshire.gov.uk](mailto:oscb@oxfordshire.gov.uk). An initial analysis will be completed in **January 2017**. This will inform the **Peer Review** event that will be held in **February 2017**. A final analysis report will be produced in April 2017.

### Guidance on completing the self-assessment

Guidance on the standards and the rating system can be found [here](#) (page 18 onwards).

## Safeguarding Self-assessment Practitioner Questionnaire

**Note:** The below questionnaire can be used with a small number of staff (at least 10% of workforce). Just let the Safeguarding Board Business Unit know how many and what percentage of staff that constitutes. Provide a summary of the findings from your agency rather than the individual responses. **To obtain a blue rating** you need to have completed this or, an alternative safeguarding questionnaire, which helps you assess the effectiveness of strategic arrangements for safeguarding children and adults with care and support needs.

### ----- Template: Questionnaire for frontline staff

As part of our safeguarding self-assessment tool we are asking a sample of front line staff to complete this short questionnaire which will help us assess the effectiveness of our strategic arrangements for safeguarding children and adults with care and support needs.

Topic	Item	Comment / evidence
<b>1. Training</b>	When did you last have Safeguarding Training and how have you developed your practice to incorporate your revised or new safeguarding knowledge?	
	Can you provide an example of how it has improved outcomes for the person you were working with?	
<b>2. Knowledge</b>	What would you do if you had a safeguarding concern about a child or adult with care and support needs?	
	What procedures would you use and where would you find them?	
	Within your specialist area, what is your understanding of working with whole family issues?	
	How does this influence your practice?	
	How confident do you feel asking if the child/family/adult needs any help?	
<b>3. Action</b>	How would you respond to a safeguarding allegation made against another member of staff?	
<b>4. Action</b>	When did you last look at the online procedures, what for and was it useful?	

<b>5. Support</b>	What's the name and contact details of your organisation's lead officer for safeguarding?	
	How confident are you that your supervision meets your needs in fulfilling your safeguarding responsibilities?	
<b>6. Documentation</b>	What documentation would you use to support a safeguarding referral?	
	What tools might you use?	
Post title of interviewee:		
Post title of interviewer:		
Any agreed actions:	(what / when / who)	
Date signed off:		

## 2015 Safeguarding Self-assessment Actions

All agencies are asked to use the table below to record what progress has been made against the actions noted for their agency in the 2015 Section 11 Safeguarding Self-Assessment.

### Progress Against 2015 Actions

Action	2016 update
Please see attached action plan following on from the 2015 internal review	

## Part 1: Leadership, Strategy and Working Together

### 1A - Senior management have commitment to the importance of safeguarding and promoting the welfare of children and adults with care and support needs

**How effective is the commitment of senior management to safeguarding and promoting the welfare of children and adults with care and support needs within your agency / organisation?**

#### Compliance checklist – policies & procedures, organisational arrangements

1. There is a named person at senior level responsible for safeguarding and championing safeguarding is clearly in their job description and that they understand and undertake their responsibilities	Y
2. Strategies and plans include reference to safeguarding and are clear about responsibilities in relation to: <ul style="list-style-type: none"> <li>a. the impact of our services in safeguarding children and adults with care and support needs</li> <li>b. what are the criteria for deciding who we work with</li> <li>c. The quality of our work</li> <li>d. Whether the timing of our interventions are appropriate for the child and adults with care and support needs safety</li> </ul>	Y
3. Safeguarding activity is routinely monitored within the organisation, issues are identified at the appropriate level and resources are put in place to resolve them. We can explain (a) our agency’s internal escalation arrangements for safeguarding concerns and (b) how we know that they are complied with	Y
4. Senior managers demonstrate good understanding of safeguarding, keeping abreast of local and national developments and learning, to ensure that practice continues to improve	Y
5. Senior managers communicate to their organisation that safeguarding is core business and are able to demonstrate that staff are aware of their individual responsibilities.	Y

#### Describe / identify how your organisation meets this standard.

There is a Designated Safeguarding Lead Officer (DSO) at Senior management level. At Director level a Strategic Safeguarding responsibility has been identified. An elected councillor has also been appointed to scrutinise procedures. Six Safeguarding leads have been identified within the organisation drawn from Community Services, Community Safety, Housing and the Corporate performance teams.

An independent review of the Council’s Safeguarding Policy and Procedures was carried out in 2015. One of the recommendations was to appoint a dedicated Safeguarding Officer to carry out routine monitoring and staff training. This is taking place in October 2016.

Safeguarding is evidenced in Job descriptions.

The DSO has delivered safeguarding training at the Managers Forum and attends staff briefings to promote a Safeguarding culture and provide advice and guidance. This has been underpinned by the Chief Executive at quarterly all staff briefings.

The DSO has also conducted Safeguarding Training for elected Councillors.

Safeguarding is included in the Council’s business plan and is evidenced in service plans. Safeguarding leads hold regular monitoring meetings. In addition there are arrangements for Scrutiny by elected Councillors; these are linked to the sign off of Section 11 returns and regular performance reporting on the delivery of the action plan.

Safeguarding Policy and Procedures have been updated during 2016 in order to capture key learning points.

**What impact has this had on outcomes for children and adults with care and support needs?**

N/A

**How do you rate your compliance with this standard?**

Blue x	Green	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
<b>Actions required to raise to green/blue</b>			<b>Lead and Timescale</b>

**1B - There is a clear line of accountability and a clear statement of the agency’s responsibility towards children and adults with care and support needs**

**How clearly are the agency’s responsibilities towards children and adults with care and support needs communicated to all staff and how clear are the lines of accountability within the**

**organisation for work on safeguarding & promoting welfare?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. There are clearly documented lines of accountability from staff through the organisation to the named person, a clear escalation and whistleblowing policy and a clear complaints procedure.	Y
2. Staff feel able to raise concerns, including about workloads, and encourage service users to raise complaints when they are dissatisfied with the service they are receiving, e.g. <i>“we know because we can cite examples of frontline practitioners doing this because...”</i>	N/A
3. Effective complaints systems are in place, in line with current statutory guidance, for children and adults with care and support needs, staff & other people to make complaints and themes of these complaints are addressed, e.g. <i>“we know because we know what has bothered them over the last 12 months is...”</i>	Y
4. Child / Service User friendly complaints information is used, which includes information on what safeguarding issues are and how to raise a safeguarding concern	N
5. Recommendations / outcomes on practice and changes to procedures are communicated to staff, e.g. <i>“we do this via...”</i>	Y
6. Staff feel there is clear communication of the legislative framework within which safeguarding sits, including in relation to domestic abuse, mental health, etc	Y
7. Anyone who comes into contact with children and adults with care and support needs or their families has their responsibility towards the person’s welfare explicitly stated in job description and this is reviewed in appraisals and 1 to 1s.	Y
8. Staff receive adequate reflective supervision and support, e.g. <i>“We can explain (a) our agency’s <b>supervision policies</b> for safeguarding issues and (b) how we know that they are complied with...”</i>	Y

**Describe / identify how your organisation meets this standard.**

The Council has a Whistleblowing Policy and there is a team of investigating officers who have been trained to undertake the necessary investigation in cases of allegations against staff. The DSO is the key contact officer with the OSC/AB for managing the allocations process.

In line with corporate policy, managers hold regular 1:1s with staff and there is a formal system of twice yearly appraisals which are recorded and monitored by HR. These would allow the opportunity for staff to formally raise concerns about workloads.

The Council has a complaints procedure which is available to all. Given the nature of our services we do not have a specific ‘child friendly’ complaints procedure but would rely on our corporate complaints process should this be necessary. Feedback is requested from participants and their carers following activities (arts, sports sessions, holiday play schemes etc) run by the Council.

Recommendations are communicated to staff via the all staff newsletter “In Brief” and face to face at briefing sessions.

Job descriptions and responsibilities are reviewed annually as part of the staff appraisal system.

**What impact has this had on outcomes for children and adults with care and support needs?**

Given the nature of our services there is no requirement for us to monitor this.

**How do you rate your compliance with this standard?**

Blue

Green X

Amber

Red

**Actions required to raise to green/blue**

**Lead and Timescale**

Actions required to raise to green/blue	Lead and Timescale

**1C – Local Safeguarding Boards’ Effectiveness**

**TO BE COMPLETED BY BOARD MEMBER AS A SINGLE AGENCY RESPONSE**

**How is your organisation’s commitment to safeguarding evidenced through the Safeguarding Boards, covering their whole agenda from prevention to intervention?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. Your representative on the safeguarding board is sufficiently senior on the Safeguarding Boards (SB), ensuring effective leadership and coordination in the delivery of Safeguarding policy and practice.	Y
2. You contribute human and financial resources to the Safeguarding Boards to enable it to function effectively. <ul style="list-style-type: none"> <li>a. You contribute towards the Safeguarding Boards multi-agency safeguarding training agenda.</li> </ul>	Y

3. You provide challenge at the SBs, ensuring the impact and effectiveness of service delivery.	Y
4. You contribute towards the SBs understanding of how well it is performing and what difference it makes through regular self-assessment and benchmarking and have a positive attitude to learning and improving across partners.	Y
5. You contribute towards the SB's duties to safeguard children and adults with care and support needs both proactively, through awareness raising and prevention of abuse and neglect, and responsively, by creating frameworks to effectively respond once concerns are raised.	Y
6. You act upon data, information and intelligence gathered by the SB to identify risk and trends and formulates action in response to these.	Y
7. You share issues raised a the board with your organisation	Y
8. You consider the SB to have good quality specialist advice e.g. legal, medical or social work, when necessary.	Y
9. You understand the links between the Safeguarding Adults Board, Children's Safeguarding Board, Health and Wellbeing Board & Community Safety Partnerships and reporting mechanisms (to the SBs, between the SBs and the boards of partner organisations) are clear and effective.	Y
10. There are clear protocols in place that integrate different agency procedures for reporting serious incidents.	Y
11. There are mechanisms in place to ensure that the views of people who are in situations that place them at risk of abuse, and carers, inform the work of the SBs.	Y

**Describe / identify how your organisation meets this standard.**

The implementation of Seeit report it

The bi monthly safeguarding leads meeting to disseminate informations and discuss best practise and legislative change.

To attend SB meetings as necessary and take an active part in maintaining the partnership approach to safeguarding residents of all ages

Positive information sharing protocols are in place that support the ambitions of both boards

Tight control over reporting process and procedures are in place

**What impact has this had on outcomes for children and adults with care and support needs?**



How do you rate the <u>Safeguarding Boards' compliance</u> with this standard?			
Blue <input type="checkbox"/>	Green X <input type="checkbox"/>	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
Actions required to raise to green/blue			Lead and Timescale

**Part 2: Commissioning, Service Delivery and Effective Practice**

<b>2A - Service development takes into account the need to safeguard and promote welfare and is informed, where appropriate, by the views of service users and their families</b>	
<b>How effectively does service development take into account need to safeguard? How is it effectively informed by views of children and adults with care and support needs, their carers or families? How can you demonstrate improved outcomes?</b>	
<b>Compliance checklist – policies &amp; procedures, organisational arrangements</b>	
1. Service development has taken into account the need to safeguard and promote the welfare of children and adults with care and support needs	Y
2. Children and adults with care and support needs are actively involved in design, development & delivery of services & their involvement is demonstrated	N/A
3. All practical information is made available and different methods of communication are available to service users to express their views and hear what is available for them	N/A
4. Children and adults with care and support needs from black and minority ethnic backgrounds and other diversity strands are appropriately consulted in the development of services and of equality policies to ensure that all aspects of the planning and delivery of services reflect the needs of the changing population of Oxfordshire.	N/A
5. Outcomes are consistent, regardless of the ethnicity, cultural identity / diversity, gender, sexuality, disability or age of the service user.	Y
6. There is a responsive process in place to act on identified unmet need and feed into business planning and identify where gaps are met elsewhere and what happens if there is not	Y
<b>Describe / identify how your organisation meets this standard.</b>	
The corporate service planning process requires Heads of Service to detail service provision. The service planning template has been amended for 16/17 to require more detail around the consideration of	

safeguarding children, young people and vulnerable adults. Service plans are monitored by the DSO.

The range of services that have direct contact with children, young people and vulnerable adults is limited and the context of questions 2 ,3 and 4 are not directly relevant to a District Council.

The Council has an Equality Scheme and an Equality and Diversity Action Plan is in place. This accounts for the needs of all staff and citizens. The Equality and Diversity Action Plan is monitored on a quarterly basis and steps are taken to mitigate issues where they are identified.

**What impact has this had on outcomes for children and adults with care and support needs?**

**To obtain a blue rating:** you need to provide evidence of how you ensure service development takes account of safeguarding and how commissioning arrangements ensure safeguarding is clearly defined in regards to your safeguarding duties. This needs to include how contract monitoring will address any safeguarding issues or areas for development.

**Given the nature of our services there is no requirement for us to monitor this.**

**How do you rate your compliance with this standard?**

<b>Blue x (in relation to the services offered by a District Council)</b>	<b>Green</b> <input type="checkbox"/>	<b>Amber</b> <input type="checkbox"/>	<b>Red</b> <input type="checkbox"/>
<b>Actions required to raise to green/blue</b>		<b>Lead and Timescale</b>	

**2B - There is effective inter-agency working to safeguard & promote the welfare of children and adults with care and support needs**

**How effective is inter-agency working by your organisation?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. We make practitioners aware of the multi-agency procedures and we monitor the use of them	<b>Y</b>
2. We make practitioners aware of the multi-agency tools for identifying, assessing and recording safeguarding concerns, such as the Neglect Tool, CSE	<b>Partially where</b>

Screening Tool, self-neglect tool, Risk Assessment Tool, Mental Capacity Assessment Form and that they are using them	<b>applicable</b>
3. We ensure effective contribution to joint working and safeguarding investigations by participating in operational or strategic multi-agency meetings, ensuring that non-participation is addressed to ensure that there is a sustained contribution to the process.	<b>Y</b>
4. We are compliant with the requirements of the <a href="#">Prevent duty</a> and in particular in relation to policies and procedures regarding staff training, referring to the Channel panel and use of public resources e.g. rooms, ICT equipment, commissioning arrangements.	<b>y</b>
5. If we lead multi-agency safeguarding meetings we take, circulate and store minutes and ensure that any regular meetings are appropriately tied in to the safeguarding system so that strategic issues can be escalated	<b>Not something CDC would do</b>
6. Staff, managers, officers and members work across individual service and agency boundaries, and beyond traditional definitions of their roles, to improve outcomes.	<b>Y</b>
7. We are delivering/ contributing to effective prevention and early help.	<b>Y</b>

**Describe / identify how your organisation meets this standard.**

***Easily accessible access to inter agency guidance for all staff.***

Access to OSCB guidance is readily available on the intranet. Further promotion is done via staff briefings and the staff newsletter – In Brief.

**What impact has this had on outcomes for children and adults with care and support needs?**

**To obtain a blue rating you should:**

1. Show that you have reviewed internal guidance for working with / involvement with other departments/agencies and that you have reviewed induction information to ensure working with partners is clearly stated.
2. Show that you have a central recording system for allegations, referrals or other concerns to enable internal monitoring and assist with external scrutiny (such as multi-agency case reviews and audits).

**Given the nature of our services there is no requirement for us to monitor this.**

**How do you rate your compliance with this standard?**

Blue

Green x

Amber

Red

**Actions required to raise to green/blue**

**Lead and Timescale**


**2C - There is effective Information Sharing**

**How effective are the organisations arrangements for information sharing governance?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. There this a clear policy on appropriate information sharing both across and within agencies to ensure children and adults with care and support needs are safeguarded and their welfare promoted and that this policy is complied with and made explicit to all service users.	Y
2. Training addresses need for effective information sharing both across and within agencies and encourages staff to use professional judgement.	Y
3. Staff know where to seek advice on information sharing both across and within agencies & have confidence in their professional judgement.	Y

**Describe / identify how your organisation meets this standard.**

Staff are encouraged to share safeguarding concerns with the Safeguarding Officers and to follow the guidance set out in the policy and procedures regarding referrals to other agencies.

We have introduced “See It Report It” (SIRI) an intelligence gathering mechanism to encourage front line staff who have direct contact with the public to capture their concerns and for there to be a corporate reporting to Social Care (adults or children) and, or Police. The scheme is designed to enable information sharing and provide intelligence to support on-going and open casework or prompt actions that could lead to new referrals being made.

SIRI is designed to provide a systematic and auditable basis on which to share information. Training has been delivered across the organisation and the system is easily accessed via the Intranet homepage.

We are confident that staff who come into contact with children, young people and vulnerable adults in the course of their work are aware of the need to raise concerns and share information with other relevant agencies.

The development of the Taxi Licensing policies involving County and District authorities have underlined the determination to use whatever powers and information we each hold to improve the probability of

keeping vulnerable adults children and young people safe.

**What impact has this had on outcomes for children and adults with care and support needs?**

To obtain a blue rating you should have links to the [information sharing protocols on the OSCB and OSAB website](#) where appropriate within your organisation and appropriate agreements in place where this protocol is too strategic for your purposes

Given the nature of our services there is no requirement for us to monitor this.

**How do you rate your compliance with this standard?**

Blue

Green x

Amber

Red

**Actions required to raise to green/blue**

**Lead and Timescale**

**2D – Commissioning arrangements are robust and effective**

**COMMISSIONERS ONLY TO COMPLETE**

**How effective are the organisations commissioning arrangements?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. Commissioning and contracting set out quality assurance and service standards in order to safeguard children and adults with care and support needs.	Y
2. We have developed mechanisms for people who are organising their own support and services to manage risks and benefits e.g. Direct Payments	N/A
3. Clear expectations and reporting requirements are placed on providers of services.	Y
4. Contract monitoring has a focus on safeguarding, dignity and respect, and any shortfalls in standards are addressed.	Y
5. Providers meet essential/ fundamental national and local standards and quality improvement is tracked and acted on.	Y

6. Safeguarding referrals/alerts across providers are tracked and under or over-reporting patterns addressed.	N/A
7. Quality in commissioned services is monitored so that abuse and neglect is prevented as far as reasonably possible.	<b>We don't commission services of this nature</b>
8. Actions take place to safeguard individuals when standards in services put people at risk.	Y
9. Agencies commissioned to provide services have safer recruitment in place.	Y
10. There is a clear process for escalating service gaps to the commissioning body.	Y

**Describe / identify how your organisation meets this standard.**

The Council's Procurement process requires contractors who provide front line services to be clear about their safeguarding policy and procedure. Contracts are only awarded if there is satisfactory safeguarding in place.

**What impact has this had on outcomes for children and adults with care and support needs?**

To obtain a blue rating you should have links to the [information sharing protocol on the OSCB and OSAB website](#) where appropriate within your organisation and appropriate agreements in place where this protocol is too strategic for your purposes

**Given the nature of our services there is no requirement for us to monitor this.**

**How do you rate your compliance with this standard?**

Blue

Green X

Amber

Red

**Actions required to raise to green/blue**

**Lead and Timescale**

Actions required to raise to green/blue	Lead and Timescale

**2E – Thematic Issue: Transport of Children or Adults With Care and Support Needs**

**If your agency is responsible for transporting children and adults with care and support needs, how do you ensure they are transported safely with due regards to the safeguarding of the passenger?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. Identification of a named person at senior management level to champion the importance of safeguarding in transport and to promote the welfare of children and adults with care and support needs throughout the service. This person is known as the designated safeguarding transport lead.	N/A
2. All drivers/escorts are fully vetted and appropriate risk management arrangements are in place in accordance with the standards agreed in Oxfordshire's <a href="#">Joint Operating Framework</a> .	N/A
3. All drivers/escorts are trained in safeguarding with Oxfordshire County Council's training provider.	N/A
4. All drivers/escorts receive a standard Code of Conduct and best practice information materials on safeguarding in accordance with Oxfordshire's Joint Operating Framework.	N/A
5. Information is shared across the county council, district councils and the police in accordance with the Joint Operating Framework Information Sharing Schedule.	Y
6. All policies have been refreshed and approved to ensure full compliance with the Joint Operating Framework.	Y
7. Performance Monitoring information is shared and reviewed in accordance with the Joint Operating Framework.	N/A
8. Staff who are responsible for driver vetting, quality monitoring and complaints investigation receive generalist and specialist designated lead safeguarding training so that they can identify potential safeguarding risks.	Y
9. Agencies who are not part of the Joint Operating Framework [ADD HYPERLINK] but who have a responsibility for transporting children and adults with care and support needs report as relevant on safeguarding arrangements in relation to vetting/training; information sharing; policy development; enforcement, complaints, allegations management; performance monitoring arrangements; and quality standards.	N/A

**Describe / identify how your organisation meets this standard.**

**Any and all Taxi licensing activity is undertaken in line with the JOF**  
**Training is in place and active participation in monitoring the effectiveness of the framework across the county takes place regularly**



What impact has this had on outcomes for children and adults with care and support needs?			
Blue <input type="checkbox"/>	Green X	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
Actions required to raise to green/blue			Lead and Timescale

**Part 3: Performance and Resource Management**

<b>3A - There is effective regular training on safeguarding &amp; promoting the welfare of children and adults with care and support needs for all staff working with or in contact with these groups</b>	
<b>How effective is training on safeguarding &amp; promoting welfare of children and adults with care and support needs for all staff &amp; volunteers working with these groups? Can you demonstrate improved outcomes as a result?</b>	
<b>Compliance checklist – policies &amp; procedures, organisational arrangements</b>	
1. There is a clear training strategy for our organisation.	Y
2. We have made staff aware of current safeguarding concerns and have provided training relevant to their roles such as radicalisation; female genital mutilation; sexting; self-harm; self-neglect, peer on peer violence in the following ways ....	Y
3. A clear induction process is in place for all staff, trustees and volunteers that addresses safeguarding & is delivered in a timely way, e.g. <i>“we can provide you with some sample materials...”</i>	Y
4. All staff and volunteers are appropriately trained and supported through a range of methodologies, e.g. <i>“we have established who needs to do what training....”</i>	Y
5. We can evidence safeguarding training undertaken by staff through a database. We have a system in place which we monitor to check who has been / needs to be trained, e.g. <i>“we can tell you that ..% of our staff are trained to the right level...”</i>	Y
6. We contribute trainers and / or resources to the multi-agency safeguarding	Y



training programme.	
7. Training explores issues of diversity in relation to safeguarding.	Y
8. We can demonstrate impact of training on practice from having asked staff/volunteers at supervision how their practice has changed through their safeguarding training.	Y

**Describe / identify how your organisation meets this standard.**

A training needs matrix has been established to assess the level of safeguarding required by all roles across the Council and a database of staff training to date has been completed. The information is being analysed and, once appointed, the dedicated Safeguarding Officer will address gaps/training needs.

The Council carried out an independent review of safeguarding during 2015 and as a consequence of the ensuing recommendations a safeguarding training programme for councillors has been implemented.

Front line leisure and housing staff are required to complete NSCBs e-learning introduction course.

A series of staff briefings have been held including CSE, FGM, Modern Slavery and Prevent.

**What impact has this had on outcomes for children and adults with care and support needs?**

Given the nature of our services there is no requirement for us to monitor this.

**How do you rate your compliance with this standard?**

Blue

Green x

Amber

Red

Actions required to raise to green/blue	Lead and Timescale
Further refinement to the training needs matrix and staff database	Safeguarding Officer by September 17
Training impact assessment needs further refinement	Safeguarding Officer by September 17

**3B - Safer recruitment procedures, including vetting procedures and those for managing allegations by children and adults with care and support needs against professionals, are in place**

**How robust are organisation's recruitment, vetting and managing allegations procedures?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. Safer recruitment & selection procedures are in place in line with statutory guidance and is audited.	Y
2. Safer recruitment training is in place for managers involved in recruitment.	Y
3. We have procedures for managing allegations, such as whistle blowing, and escalating as appropriate.	Y
4. A senior manager has been identified for the managing allegations process and understand when to refer to the adult safeguarding manager or Designated Officer and acts upon guidance from the adult safeguarding manager or Designated Officer appropriately.	Y
5. Support is available for staff who are subject to allegations.	Y

**Describe / identify how your organisation meets this standard.**

Guidance for recruiting managers on Safer Recruitment is available in the Recruitment and Selection Policy and Procedure. Recruiting Managers must complete the recruitment and selection training which includes training on safer recruitment before they complete any recruitment process.

References are always taken up with candidates prior to commencement in a new role and job offers are made subject to the results of references and pre-employment checks. Gaps in employment are explored. This is a very clearly communicated process. Start dates are not confirmed until all pre-employment checks have been completed.

A statement regarding the need for a DBS check is included in adverts and on person specifications where the role involves working with children or vulnerable adults. Recruiting managers are given a number of choices of safeguarding questions to choose from, to ensure they are most fitting for the vacancy being recruited to and the contact with children and vulnerable adults.

Recruitment paperwork is checked by HR to ensure that where required, safer recruitment questions have been asked.

Evidence is recorded to demonstrate that safeguarding questions have been asked during interviews where the role involves working with children and vulnerable adults.

DBS checks are completed for all holders of roles that require working with children or vulnerable adults. These checks are completed for new recruits and then for staff in these roles every 3 years. References and DBS checks are kept on file.

Employees are placed on a minimum 6 month probation period, unless they are on a fixed term contract of 6 months or less and then this period is reduced to 3 months. Managers and employees are required to meet on a monthly basis during the probation period to ensure that performance is assessed and necessary training and development provided.

acts as external verifier and moderator.

The Council has a Whistleblowing Policy and there are a team of investigating officers who have been trained to undertake the necessary investigation in cases of allegations against Staff.

Allegations against staff would be managed using the Safeguarding Policy and if necessary the Disciplinary Policy and

Procedure. The nominated DSO is the key contact for managing the allegations process. The DSO would be notified and would then make the necessary referrals to other agencies as required.

Allegations of abuse committed elsewhere and reported by our staff would be dealt with in line with our Safeguarding Policy and Procedures.

**What impact has this had on outcomes for children and adults with care and support needs?**

Given the nature of our services there is no requirement for us to monitor this.

**How do you rate your compliance with this standard?**

Blue x	Green x	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
<b>Actions required to raise to green/blue</b>			<b>Lead and Timescale</b>

**Part 4: Outcomes for and the experiences of people who use services**

- This theme looks at what has actually been achieved by Safeguarding and the quality of experience for people who have used the services and support.

**4A - People's experiences of safeguarding**

**How do organisations capture the views and experiences of service users and use these to improve the service for them and future service users?**

**Compliance checklist – policies & procedures, organisational arrangements**

1. Safeguarding is personalised, so that service users experiencing or receiving safeguarding services are treated sensitively and respectfully	N/A
2. Outcomes are defined by the individuals concerned or, where people lack decision-making capacity, by their representatives or advocates. Advocacy is available and used appropriately for children and adults with care and support needs who are (or may have been) experiencing abuse.	N/A

3. Children and adults with care and support needs who have experienced abuse are supported and are able to access services that are appropriate to them, including signposting to and supporting through effective criminal, civil or social justice frameworks	N/A		
4. The safeguarding process is proportionate, puts individuals in control and where this is not possible (for instance where there is concern that an individual or organisation could harm others) this is fully discussed and the person's views taken into account as much as possible.	N/A		
5. There are services available to support carers.	N/A		
6. There are services available for perpetrators to address their behaviours where appropriate.	N/A		
7. Extended family members, friends and neighbours are engaged in safeguarding when this is appropriate.	N/A		
<b>Describe / identify how your organisation meets this standard.</b>			
<b>What impact has this had on outcomes for children and adults with care and support needs?</b>			
<b>How do you rate your compliance with this standard?</b>			
Blue <input type="checkbox"/>	Green <input type="checkbox"/>	Amber <input type="checkbox"/>	Red <input type="checkbox"/>
<b>Actions required to raise to green/blue</b>		<b>Lead and Timescale</b>	

## Guidance notes to support the completion of the self-assessment tool

This assessment tool has been designed to provide agencies with the opportunity to highlight areas of strength and to identify areas for development in respect of their section 11 duties and responsibilities as well as the expectations from the LGA in regards to their duties towards adults with care and support needs.

**In completing the assessment tool please note if an agency decides that a particular strand within the assessment tool is not applicable the agency must set out why the standard is not relevant (e.g. where the strand states it's for 'Commissioners Only' and your service does not commission any external people or agencies).**

This tool covers the continuum of safeguarding need from early safeguarding provision to statutory protection processes.

### BRAG rating and evidencing the standards

The form uses the BRAG colour rating. These are as follows:

**Blue** – the standard/compliance point is fully met and can be evidenced as completed

**Green** – the standard/compliance point is near completion or fully met but cannot be evidenced at this point.

**Amber** – the standard/compliance point is not met but work has begun or work is underway but has experienced delays in completion.

**Red** – the standard/compliance point is not met, work is not underway and there are issues with commencing work.

When providing evidence to support compliance with standards you must be assured that statements made within the completed tool are correct and based on **accessible evidence**. This self-assessment tool does not require agencies to submit documentation as evidence; however evidence may be subsequently requested.

The self-assessment must demonstrate the **impact** of policies and practice on identifiable improved outcomes for children and adults with care and support needs, for which evidence is available. Standards rated as Blue or Green will be downgraded to Amber if they do not complete the two follow-up sections “describe / identify how your organisation meets this standard” and “what impact has this had on outcomes for children and adults with care and support needs” addressing all the points in the compliance checklist (where they are relevant).

## **Leadership, Strategy and Working Together**

1A - Senior management have commitment to the importance of safeguarding and promoting the welfare of children and adults with care and support needs

1B - There is a clear line of accountability and a clear statement of the agency's responsibility towards children and adults with care and support needs

1C - Local Safeguarding Board Effectiveness

## **Commissioning, Service Delivery and Effective Practice**

Standard 2A - Service development takes into account the need to safeguard and promote welfare and is informed, where appropriate, by the views of children and adults with care and support needs & families

- 2A4 – this comes from a Serious Case Review

Standard 2B - There is effective inter-agency working to safeguard & promote the welfare of children and adults with care and support needs

- 2B8 – this comes from a Serious Case Review

Standard 2C - There is effective Information Sharing

Standard 2D - Commissioning arrangements are robust, effective and cost-effective

Standard 2E - Thematic Issue: Transport of children and adults with care and support needs

## **Performance & Resource Management**

3A - There is effective regular training on safeguarding & promoting the welfare of children and adults with care and support needs for all staff working with or in contact with these groups

- 3A6 - this comes from a Serious Case Review

3B - Safer recruitment procedures, including vetting procedures and those for managing allegations by children and adults with care and support needs against professionals, are in place

## **Outcomes for, and Experiences of, People Who Use Statutory Services**

Standard 4A – People's experience of safeguarding