

Key Code for subgroups

Training

Quality Assurance

Engagement

Safeguarding Adults Case Review

Chairs

Safeguarding Adults Board – Business Plans from 1 st April 2017 to 31 st March 2018 Sub Group: All				
Strategic Priority 1: Assurance that the local safeguarding arrangements are in place				
Outcomes	Work stream required	By who (lead)	Date to be completed	Success Criteria
1.1 Staff are competent, confident and skilled in safeguarding practice	1. Develop training strategy.	Training	March 2018	1. Present to the Dec 17 Training Sub Group meeting. Board sign off at the March 2018 SAB meeting
	2. Deliver and schedule a range of safeguarding events/ workshops to Private, Voluntary and Independent	Training	31 st March 2018	2. Deliver three events: April 2017

	<p>(PVI) groups/organisations to increase safeguarding awareness and responsibilities.</p> <p>3. Identify a consistent method to capture safeguarding training as a key performance indicator across partner organisations to ensure that all staff have basic awareness training.</p>	Training	March 2018	<p>June 2017 February 2018. Provide feedback and evaluation to April 18 subgroup.</p> <p>3. Develop a set of performance indicators and present to Feb 18 subgroup to endorse.</p>
1.2 There is capacity within all services to respond effectively to safeguarding concerns	<p>1. Partners to complete Annual Assurance document for 2017/18</p> <p>2. Analyse 2016/17 Annual Assurance information to identify trends for future work including peer challenge and support for agencies</p> <p>a. Challenge events to be held for Pan-Sussex and West Sussex agencies</p> <p>b. Follow-up surveys to agencies.</p>	Quality Assurance	<p>1. March 2018</p> <p>2. January 2018</p>	<p>1. Scrutiny with each agency</p> <p>2. Present analysis to subgroup in Nov 17</p>

	<p>3. Develop Risk Register</p> <p>4. MA Audits</p> <p>5. Themed Audits – Health; safeguarding referrals from the health economy</p> <p>6. Implementation of the quality referral pathway. The Care Act Guidance states that “safeguarding is not a substitute for:</p> <ul style="list-style-type: none"> • providers’ responsibilities to provide safe and high quality care and support; • commissioners regularly assuring themselves of the safety and effectiveness of commissioned services; • the Care Quality Commission (CQC) ensuring that regulated providers comply with the fundamental standards of care or by taking 		<p>3. September 2017</p> <p>4. End Mar 17</p> <p>5. TBC *led by CCG</p> <p>6. End Mar18</p>	<p>3. Risk register to be agreed at the Sep 17 Board</p> <p>4. Report outcomes and actions to QA subgroup</p> <p>5. Report to QA subgroup</p> <p>6. Report to QA subgroup</p>
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	enforcement action; and the core duties of the police to prevent and detect crime and protect life and property."			
1.3 There is a robust quality assurance framework in place across West Sussex	1. Safeguarding Adults Board Quality Assurance Framework reviewed and signed off by QA subgroup	Quality Assurance	1. End Jan 18	1. Sign off at Q A Jan 18
1.4 Safe recruitment practices are embedded across all organisations including those who draw on volunteers	1. Gather information from commissioning agencies to ensure appropriate liaison with professional standards/ bodies (NMC, HCPC, NMDS, Skills 4Ccare etc).	Training	1. End Mar 18	1. Assurance from commissioners that systems are in place
1.5 All provider organisations in West Sussex can demonstrate plans and activities to address safeguarding issues in continuing professional development	1. Increase the number of people in the Private, Voluntary and Independent Sector, who are trained in Basic Safeguarding Awareness and/or have booked on to this training	Training	Review: March 2018	1. Reporting to SAB Training sub group re: increase in numbers following safeguarding events in 2017
	2. Liaise with the WS Learning	Training	Ongoing,	2. Reporting at SAB

	<p>Gateway team and other training providers, as appropriate, to make sure they are aware of numbers of staff who may need safeguarding training (refresher courses and Train the Trainer may be considered)</p> <p>3. Liaise with the learning Gateway to ensure the Safeguarding Standards are available on the LG website for the PVI</p> <p>4. Liaise with the Development and Communications Officer to ensure that training resources for PVI providers are available on the SAB website.</p>	<p>Training</p> <p>Training</p>	<p>when data is available</p> <p>March 2018</p> <p>On-going</p>	<p>Training Sub Group meetings, as required</p> <p>3. Information is available on the LG website</p> <p>4. Regular up to date information is live on the website</p>
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Strategic Priority 2: Prevent Abuse and Neglect where possible

Outcomes	Work stream required	By who (lead)	Date to be completed	Success Criteria
2.1 Increased awareness in the community of safeguarding issues	1. Develop a programme of events and campaigns to increase the public's awareness and understanding of adult	Engagement	May 2017	1. Present project plan to subgroup

	<p>safeguarding</p> <p>2. Develop a Pan Sussex Communications Plan for Safeguarding week during 27th November to 1st December 2017</p> <p>3. Map all the materials/information agencies have on safeguarding within their organisation</p> <p>4. Ensure safeguarding information/materials and literature is consistent and up to date across all agencies for the public</p> <p>5. Raise awareness of FGM, domestic abuse and Modern Slavery as a part of the key safeguarding work and practice</p>	<p>Engagement</p> <p>Engagement</p> <p>Engagement</p> <p>Engagement</p>	<p>September 2017</p> <p>Dec 2017</p> <p>March 2018</p>	<p>2. Produce project plan of activities to be delivered during Safeguarding Week, present at September 2017 Engagement meeting.</p> <p>3. On-going, present findings to January 18 Engagement sub group meeting</p> <p>4. On-going, present findings to January Engagement sub group meeting</p> <p>5. To form part of events and campaign programme</p>
2.2 To have a coherent multi-	1. Communications strategy	Engagement	June 2017	1. Present Comms Strategy to June 17

<p>agency communication and prevention strategy in place to reduce and minimise abuse and neglect</p>	<p>2. Increase safeguarding awareness through:</p> <ul style="list-style-type: none"> a. Safeguarding newsletter – bi- monthly b. Website c. Leaflets d. Targeted awareness events e. Social media <p>3. Continue to build and strengthen relationships with other strategic boards</p>	<p>Engagement</p> <p>Engagement</p>	<p>On going</p> <p>March 2018</p>	<p>Board for sign off.</p> <p>2. Produce monitoring report to subgroup re: visitors, page hits etc. March 18</p> <p>3. Identify other strategic boards across partner agencies to establish links with and attend meetings once a year. Bring information back to subgroup in March 2018.</p>
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Strategic Priority 3: Ensure there is an appropriate response when abuse or neglect has occurred.

Outcomes	Work stream required	By who (lead)	Date to be completed	Success Criteria
3.1 To Make Safeguarding	1. To gain assurance that MSP is at the heart of all safeguarding	Quality Assurance	March 2018	

Personal	<p>activity:</p> <ol style="list-style-type: none"> a. Continue to measure MSP through MA Audits b. Follow up work with MSP and Signs of Safety. <p>2. Explore ways of capturing the individuals safeguarding experience. The board will work with partner agencies to identify and develop effective ways to capture peoples experiences of safeguarding</p>	Engagement	March 2018	Sub Group to identify and recommend ways to capture individuals safeguarding feedback and report back to March 18 Board
3.2 Protection planning for an individual is realistic and effective	<ol style="list-style-type: none"> 1. MA Audits 2. Learning from feedback mechanisms/MA Audits 3. Substance use safeguarding audit 	Quality Assurance	<ol style="list-style-type: none"> 1. End Jan 2018 2. Mar 2017 3. Mar 18 	1. Report to QA subgroup
3.3 The management of risk is realistic and mitigated to reduce, where possible	<ol style="list-style-type: none"> 1. Agency reports/inspections are raised to SAB detailing successes and challenges. 2. MA Audits are undertaken to identify the quality of work in practice. 3. Risks register implementation to ensure prioritised and proportionate responses to 	Chairs Sub Group	On going	

	strategic issues.			
3.4 To ensure that learning outcomes are addressed and embedded across all organisations	<ol style="list-style-type: none"> 1. Annual Assurance Document 2. Identify any follow up work from Learning Reviews and SAR Recommendations, to be actioned by the Quality Assurance Sub Group <ol style="list-style-type: none"> a. Ensure that recommendations are followed through. 3. MA Audits 4. Develop a short summary/briefing from Safeguarding Adult Reviews to cascade the Learning to agencies in West Sussex 	<p>Quality Assurance</p> <p>Safeguarding Adults Review</p> <p>Quality Assurance</p> <p>Engagement</p>	<ol style="list-style-type: none"> 1. April 2017 2. As appropriate 3. End March 2018 4. As appropriate 	<ol style="list-style-type: none"> 1. Pan Sussex Challenge event and 16/17 Annual report 2. Report to QA subgroup and Board 3. Effective mechanisms are in place to highlight learning i.e. through learning events and/or briefing papers

<p>3.5 All agencies are aware of their responsibilities under local policy and procedures and the Care Act</p>	<p>1. Annual Assurance Document</p> <p>4. SAR protocol – sign off</p>	<p>Quality Assurance</p> <p>Safeguarding Adults Case Review</p>	<p>1. End Feb18</p> <p>2. June 2017</p>	<p>1. Pan Sussex Challenge event and 16/17 Annual report</p> <p>2. SAR protocol agreed and signed off.</p>
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