

Safeguarding performance and quality assurance framework



Introduction

The Performance, Quality and Audit (PQA) subgroup of the East Sussex Safeguarding Adults Board (SAB) has developed this performance and quality assurance framework (PQAF) to provide assurance that the SAB and its constituent partner agencies have effective systems, structures, processes and practice in place to improve outcomes and experience in the context of safeguarding adults at risk. The terms of reference of the PQA subgroup is included as Appendix 1.

The PQAF is the key mechanism by which the SAB holds local agencies to account for their safeguarding work, including prevention and risk management.

The framework is underpinned by the six safeguarding principles:

- **Empowerment** - People being supported and encouraged to make their own decisions and give informed consent.
- **Prevention** - It is better to take action before harm occurs.
- **Proportionality** - The least intrusive response appropriate to the risk presented.
- **Protection** - Support and representation for those in greatest need.
- **Partnership** - Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.
- **Accountability** – accountability and transparency in safeguarding practice.

The national context

The Care Act 2014 has provided a statutory framework for adult safeguarding, setting out the responsibilities of local authorities, their partners and those with whom they work, to protect adults with care and support needs from abuse and neglect.

The Social Care Institute for Excellence (SCIE) offers the following guidance to SABs in relation to quality assurance:

The SAB should seek assurance of the effectiveness of safeguarding activity and that safeguarding practice is continuously improving and enhancing the quality of life for adults with care and support needs and carers in its area, in line with Making Safeguarding Personal (MSP). This should address issues of quality as well as quantity, particularly from the perspective of those who have experienced safeguarding services. It should include arrangements for:

- data recording, analysis and reporting,
- case audits,
- SAB and agencies' self-audits and peer review,
- Safeguarding Adults Reviews (SARs),
- practitioners' forums to share lessons from case audits and local good practice, from research and from SARs,
- holding member and partner agencies to account,
- the management of large-scale investigations, serious incidents, complaints, grievances, disciplinary proceedings, whistleblowing and allegations of professional malpractice or unfitness to practice, and
- the implementation of MSP at a local level and its impact on engagement and outcomes.

SABs need a range of approaches to quality assurance to monitor the effectiveness both of their own work and that of their partner agencies. These should include:

- use of data collection analysis for a quantitative perspective,
- self-audit tools, and
- qualitative reviews and audits.

Local context

The East Sussex SAB is a multi-agency partnership, made up of statutory and voluntary partners as well as lay-members, established under the Care Act 2014 to promote well-being and oversee safeguarding adults work countywide. The three core statutory partners are the local authority, the police and the NHS (Clinical Commissioning Groups).

The SAB, through its PQA subgroup, uses a range of performance improvement and quality tools to monitor work within the SAB partner agencies to ensure there is continued evaluation of the quality of services being provided and outcomes achieved.

The SAB has a number of other subgroups which are described in Appendix 3.

The East Sussex SAB is committed to a culture of continuous improvement. It will:

- Make recommendations to individual organisations as appropriate. This will include recommendations regarding any identified and evidenced need for further action or escalation.
- Through its subgroups, take a lead in developing policy and procedures to ensure a culture of continuing improvement from lessons learnt.
- Share best practice by bringing together expertise across different agencies ensuring learning from experience.
- Oversee development and action plans through the PQA subgroup.
- Through the Safeguarding Community Network, together with the Safeguarding Development Team in Adult Social Care and Health (ASCH), strengthen the involvement of clients and carers. In line with recent updated Care Act guidance, this will involve the development of surveys, as well as using existing tried and tested methods, to understand the experience of clients and carers who have been involved in the safeguarding process.
- Develop and implement multi-agency training opportunities so that findings from reviews and audits make a real impact on improving outcomes for adults.

East Sussex SAB success criteria

Describing successful safeguarding arrangements have been structured into the following outcomes:

- People feel and are safer, and their circumstances are improved as a result of safeguarding action.
- People in East Sussex are aware of safeguarding, the quality and safety of local services and what to do if they have a concern.
- People are able to report abuse and be listened to.
- Concerns about abuse and / or neglect are taken seriously and people can identify what desired outcomes they want to achieve.

The performance and quality assurance framework (PQAF)

1. Safeguarding and mental capacity competency frameworks

The East Sussex SAB has adopted the [National Competency Framework for Safeguarding Adults](#) produced by Bournemouth University in association with Learn to Care, and in consultation with the Hampshire SAB. This competency framework has been fully updated to include requirements of the Care Act 2014 and the six principles for adult safeguarding: empowerment, prevention, proportionality, protection, partnership, accountability.

East Sussex Adult Social Care & Health (ASCH)

ESCC ASCH uses the Knowledge and Skills Statement (KSS) for social workers. The KSS incorporates the adult safeguarding and Mental Capacity Act competencies. Other staff, such as occupational therapists and resource officers, work to specific professional standards and competency frameworks.

In addition to the specific competency frameworks developed for different staff groups, ASCH has adopted the National Competency Framework for Safeguarding Adults and the National Mental Capacity Act Competency Framework. ASCH applies these flexibly depending on the staff group involved and the extent of overlap with other existing internal and external frameworks.

Health care staff

The [Intercollegiate document – Adult Safeguarding: Roles and Competencies for Health Care Staff](#) (2018) sets out the competency framework for all staff working in the NHS.

Partner agencies represented on the East Sussex SAB are encouraged to use the National Competency Framework for Safeguarding Adults, or the Intercollegiate document – Adult Safeguarding: Roles and Competencies for Health Care Staff, to ensure consistency of competence across disciplines and organisations.

2. SAB strategic self-assessment

East Sussex SAB, together with the SABs in Brighton & Hove and West Sussex, has adopted a self-assessment process which provides a consistent framework for partner agencies to monitor, assess and improve their adult safeguarding arrangements. The framework has been developed so it can be used by a wide range of organisations. It includes key considerations of the Care Act 2014 and the principles of Making Safeguarding Personal.

The self-assessment is conducted every two years. The last self-assessment took place in 2019 and is due again in 2021. A common self-assessment audit tool is used by all three SABs.

The process is:

- Each organisation signed up to a SAB in Sussex is asked to complete the self-assessment.
- The organisation is required to make a judgement as to how well it is achieving a set of safeguarding standard questions based on the following RAG rating:
 - **Green** rating – the organisation meets the requirement consistently across the organisation.
 - **Amber** rating – the requirement is met in part; there may be pockets of excellence and areas for improvement.
 - **Red** rating – the organisation does not meet this requirement.

Each agency is required to develop an action plan for any improvements required, which are monitored by the SAB through the PQA subgroup.

3. Performance data

Mechanisms have been developed in ASCH to monitor safeguarding activity that occurs within East Sussex, providing information on the volume of safeguarding concerns and enquiries, source of referral, types of abuse and other data. Much of this information is used to inform the county council's statutory safeguarding return as part of the NHS Safeguarding Adults Collection (SAC).

The PQA subgroup has developed a multi-agency dataset which includes safeguarding performance data from SAB partner agencies. The PQA subgroup receives a multi-agency data report twice a year. Oversight and analysis of multi-agency data helps the SAB to:

- Identify trends in abuse category reporting and responses required.
- Evaluate the impact of safeguarding interventions.
- Identify and target training in a more informed manner.
- Allow more robust decision making through the provision of timely, accurate intelligence.
- Improve engagement and understanding between partner agencies to develop a better understanding of the work undertaken by each agency and their processes.

- Identify opportunities to improve efficiency in the management of and reporting of concerns.

4. Openness and transparency

The PQAF encourages openness and transparency from all partner agencies and organisations. This means there is an expectation that all partner agencies and organisations will notify the Board of any issues of concern, such as poor regulatory inspection outcomes, serious incidents, issues that might attract media attention, safeguarding risks on their organisation's risk register etc.

5. Adults' experience

All partner agencies are expected to have processes in place to understand adults' experiences of their services. The SAB is particularly interested in adults' experiences of the safeguarding process. This framework places an expectation on agencies and organisations to ascertain people's safeguarding experience and report them to the Board via the PQA subgroup, so that their experiences can inform the Board's work.

Partner agencies contributing to multi-agency safeguarding audits are expected to have mechanisms in place to ensure that adults' views are obtained and contribute to audits.

6. Single agency audits

Each partner agency should have in place auditing arrangements to assess the quality of their day-to-day safeguarding adults work. The PQA subgroup may ask partner agencies to share findings from such audits or ask partners to review arrangements for these.

7. Multi-agency audits

Each year the PQA subgroup will agree a work plan which includes a programme of multi-agency audits. The PQA subgroup aims to complete two themed audits per year.

The methodology for each audit will be agreed at the start of the process by the multi-agency partners involved. Typically, this will involve cases being identified from specified criteria related to the focus of the audit. Each partner agency is then requested to audit their own involvement against an agreed audit tool. Partner agencies will come together in an audit meeting to share their findings and agree the overall responses which are fed into an overview report. Alternate meetings of the PQA subgroup will be extended to allow time for this process. A separate audit meeting may be convened if appropriate or necessary.

The methodology for each audit will specify what is expected of the agency representatives taking part and this will include the following general principles:

- An operational manager to be contacted by the audit group representative of that particular agency for involvement in the audit undertaken by that agency.
- Relevant practitioners to be involved in the audit unless there are exceptional circumstances precluding this.
- Active and live safeguarding cases will not form part of multi-agency audit processes.
- Each agency to consider the benefit of involving the operational manager in the audit day itself alongside the audit group representative for that agency (where dial-in options could be utilised). Consideration would need to be given to practicalities of managing this if there are several operational managers for the different cases being audited, and discussion would be held with the SAB Quality Assurance Officer regarding this.
- Each agency to consider the appropriateness of gaining feedback from individual adults within the audit process and how this could be achieved. This would be discussed and decided at multi-agency audit planning meetings, and decisions would need to include the most appropriate person and agency to contact the adult(s), to avoid multiple contact. Consideration will be given to any adult or stakeholder feedback that has already been gained following a safeguarding enquiry, and audit tools will include a specific section for this feedback.
- Each audit methodology document will specify when learning will be fed back to frontline staff.
- Each audit methodology document will specify who or which role within each agency will feedback the learning. Heads of service or equivalent roles within each agency will be sent the report findings before they are made more widely available.

8. Learning from audits

Learning outcomes from SAB multi-agency audits will be disseminated to all partner agencies by written learning briefings which will summarise the key findings of the audit, actions for improvement and learning outcomes.

The PQA subgroup will liaise with the SAB Training & Workforce Development subgroup to ensure that learning outcomes inform the development of appropriate multi-agency training and practice. The PQA subgroup will work with the SAB Operational Practice subgroup to agree and implement changes to effect improved outcomes for adults and to measure the impact of such changes.

Learning from audits may also be shared through:

- training,
- team meetings,
- workshops and / or interagency forums,
- specific learning events, including joint events with other SABs.

9. Safeguarding Adults Reviews (SARs)

A SAR may be undertaken when an adult at risk of abuse dies or is seriously injured and abuse and / or neglect is suspected or known to be a factor, and there is concern that partner agencies could have worked more effectively to protect the adult. These reviews are a statutory duty under the Care Act 2014, and the outcomes and lessons learnt should be published.

The [Sussex SAR Protocol](#), which includes details of the referral process, methodologies and templates is contained within the [Sussex Safeguarding Adults Policy and Procedures](#).

A SAB can also carry out other types of review where the criteria for a SAR are not met, but it is identified there is multi-agency learning to be had from reviewing the case. These include:

- multi-agency reviews,
- partnership reviews,
- multi-agency case file audits,
- single agency reviews or audits, and
- agency self-evaluation audits.

The East Sussex SAR subgroup considers all SAR referrals, and will come to a view about whether a case meets the criteria for a SAR and subsequently make recommendations to the Independent Chair of the SAB. The terms of reference of the SAR subgroup are included as Appendix 2 to this framework.

10. Complaints and compliments

Each partner agency must have in place arrangements for monitoring complaints and a system for cross-referencing with safeguarding records. The SAB may ask partners to share complaints data.

The information obtained from complaints and compliments received by ASCH is reviewed regularly. This information is used to identify strengths and areas for development in safeguarding enquiries.

The East Sussex SAB has developed a [SAB Resolution Protocol](#). This is to inform the continuous development of service delivery by providing a process for the

resolution of disagreements where an agency or professional considers decisions made by other professionals or another agency is not a safe decision in the context of a safeguarding concern or enquiry.

11. Independent chairing arrangements

The role of an Independent Chair in adult safeguarding meetings is to provide support and scrutiny for best practice through consultation, advice and guidance.

Independent Chairs are also responsible for ensuring any wider learning from adult safeguarding activity is identified and actioned. Their role should promote consistent systems, practice and approaches. Independent Chairs will be used in all safeguarding enquiries of organisational abuse.

Appendix 1 – Performance, Quality and Audit Subgroup terms of reference 2021

1. Purpose of group

As a subgroup of the East Sussex Safeguarding Adults Board (SAB), the purpose of the Performance, Quality and Audit (PQA) subgroup is to establish systems for monitoring, reporting and evaluating performance across organisations with regards to adult safeguarding, linking annual reporting to improvement planning and a measurable work programme.

The group brings together managers from key agencies with responsibility for performance, quality and audit. Members will be responsible for ensuring safeguarding performance and evaluation processes are established within their own organisations. Members will be committed to effective partnership working based on trust and open communication, as outlined in the Care Act 2014. Members will need to be aware of and understand the organisational frameworks within which colleagues in partner agencies work.

Key purposes of the group include:

- Reviewing available data from key agencies to inform annual priority setting for the work plan of the Safeguarding Adults Board (SAB).
- Developing and analysing a multi-agency data set to inform safeguarding practice, linking with regional developments.
- Devising performance improvement actions to be incorporated into the annual work programme.
- Ensuring that outcomes from the experiences of clients and carers, including complaints and compliments, case file audits and client surveys influence service improvements.
- Undertaking multi-agency safeguarding audits (one audit every six months, subject to other PQA and SAB business and priorities).
- Monitoring recommendations and action plans resulting from audits.
- Oversight of any Safeguarding Adults Review (SAR) action plans; disseminating learning and ensuring integration of recommendations into appropriate service plans (a separate panel is convened to undertake the SAR itself and develop the initial action plan).
- Monitor the effectiveness of the Sussex Safeguarding Adults Policy and Procedures.

People can be members of both the PQA subgroup, and the SAR panel, providing they are independent of the case being discussed. The decision to agree a SAR

lies with the Independent Chair of the East Sussex SAB. Any professional or agency can make a referral requesting a review.

2. Membership and Chairing arrangements

Members represent the key partners on the SAB. Representatives are able to make decisions and have links to resources for performance, quality and audit.

DCI Safeguarding Investigation Unit (Chair)	Sussex Police
Head of Service, Adult Safeguarding and Quality (Deputy Chair)	Adult Social Care and Health (ASCH), East Sussex County Council (ESCC)
SAB Development Manager	East Sussex SAB
Quality Assurance and Learning Development Officer	East Sussex SAB
Planning and Performance Officer	ASCH, ESCC
Operations Manager, Safeguarding Development Team	ASCH, ESCC
Principal Social Worker	ASCH, ESCC
Adult Safeguarding Liaison Practitioner	Sussex Partnership NHS Foundation Trust (SPFT)
Senior Probation Officer	National Probation Service (NPS)
Head of Safeguarding / Named Nurse	Sussex Community NHS Foundation Trust (SCFT)
Head of Safeguarding	East Sussex NHS Healthcare Trust (ESHT)
Designated Nurse, Safeguarding Adults	East Sussex NHS Clinical Commissioning Groups (CCGs)
Strategic Housing and Projects Manager	District and Borough Council representative

The subgroup will be chaired by Sussex Police, with the Deputy Chair being the Head of Safeguarding Adults, ASCH.

Each of the core members will nominate a deputy of sufficient seniority to fully act on behalf of the agency they represent, if they are unable to attend any meeting.

Co-opted members can be agreed, dependent upon the issue under discussion, and where their input will enhance the subgroup's discussions and effectiveness of actions e.g. when undertaking multi-agency audits.

The meeting must have quorate membership of one representative from each of the statutory agencies, i.e. ASCH, Police and CCG.

Within the subgroup members are expected to:

- Contribute to the development of the subgroup as an effective, efficient and inclusive team.
- Raise concerns with the Chair as necessary.
- Share responsibility with partners for ensuring delivery of the work planned.
- Be responsible and accountable for delivering the subgroup's objectives through its' Work Plan.
- Participate in meetings both as a member of the PQA Subgroup and as a representative of their agency.

3. Meeting frequency and form

The PQA Subgroup will meet on a quarterly basis and meetings will be held via MS Teams or at St Mary's House, Eastbourne.

The SAB Administrative Officer and SAB Development Manager will provide administrative support, including in relation to organising dates, times and venues for meetings.

An agenda and papers for the meeting will be sent a week in advance of the meeting date. Members are expected to read papers in advance of meetings and have copies of relevant papers for reference within the meetings. Minutes will be kept of all meetings and circulated to members after the meeting.

4. Accountability

The group will take direction, carry forward, and report progress of its work plan to the East Sussex SAB. Links will be maintained between this subgroup and the SAB via the Chair and the SAB Development Manager. The PQA chair will attend the SAB meetings annually to provide a formal update from the group.

5. Confidentiality and Data Protection

The subgroup will communicate with members electronically in accordance with the [Sussex Information Sharing Protocol](#), and compliance with the Data Protection Act 2018 and GDPR regulations.

All matters discussed at the PQA Subgroup will be confidential, and unless agreed, should not be divulged to other parties. All agendas, reports and other documents shall be treated as confidential unless and until they become public in the ordinary course of the Board's business. However, if information is discussed that would prejudice the welfare of the person(s) concerned and/or others, it will be the responsibility of the Chair to ensure that such information is handled appropriately.

6. TOR review date

The TOR will be reviewed annually (or sooner if warranted).

Appendix 2 – Safeguarding Adults Review (SAR) Subgroup terms of reference 2021

1. Purpose

The Care Act 2014 places a statutory duty on Safeguarding Adults Boards (SABs) to undertake SARs in the circumstances described at Section 44. The Care and Support Statutory Guidance (section 14.133 onwards) sets this out in more detail. More specific supporting local guidance on SARs can be found in the [Sussex SAR Protocol and Sussex Safeguarding Adults Policy and Procedures](#).

The SAR subgroup acts with delegated responsibility from the East Sussex SAB. Its' main purpose is to monitor the delivery of its statutory duties with regards to carrying out SARs and other reviews of cases where there are lessons to be learnt around how relevant agencies may have acted differently to prevent harm or death, and advising the SAB on the lessons to be learnt.

2. Function

The key objectives of the SAR Subgroup are to:

- Ensure an effective multi-agency Sussex SAR Protocol is in place and in line with the Sussex Safeguarding Adults Policy and Procedures and compliant with the requirements of the Care Act 2014.
- Receive referrals and consider cases that may require a SAR (whether mandatory or discretionary) and to make recommendations to the SAB Independent Chair.
- Commission SAR reviewers, identify stakeholders / partners to be involved in the SAR, agree terms of reference and costs associated with each review.
- In line with Making Safeguarding Personal, ensure all reviews consider the involvement of the adult and/or the family/carer(s).
- Initiate other multi-agency partnership reviews or single agency reviews on cases, other than SARs, when it is considered that there may be lessons to be learnt in safeguarding adults at risk of abuse and/or neglect.
- Receive updates on the progress of SARs and consider the final SAR report and recommendations, ensuring this in line with the SAR Quality Markers, before submitting this to the SAB for sign off.
- Develop, monitor and review SAR and partner agency action plans, and feed this into quarterly updates to the SAB.
- Ensure links are established and maintained with other Boards and processes where required, for example, criminal investigations, coronial investigations, Domestic Homicide Reviews (DHRs), Learning Disabilities

Mortality Review (LeDeR) Programme, Child Safeguarding Practice Reviews (CSPRs) and reviews into drug-related deaths. This will include periodic attendance from colleagues from other Boards to provide relevant updates and share parallel learning across processes.

- Ensure all SARs are published on the website (whether redacted or in full) along with learning briefings and action plans, and that learning themes are shared with the Sussex SABs, National Board Managers Network, and other relevant local and national forums.
- Raise awareness of the SAR Protocol and learning from SARs with staff in all SAB agencies.

3. Membership

Membership will include core representation from the statutory members of the SAB (i.e. Adult Social Care and Health / East Sussex NHS Clinical Commissioning Group / Sussex Police) and the following additional members:

East Sussex Fire and Rescue Service (ESFRS)	Head of Prevention (chair)
Adult Social Care and Health (ASCH)	<ul style="list-style-type: none"> • Head of Adult Safeguarding • Principal Social Worker • Operations Manager – Safeguarding Development Team
Sussex Police	Detective Sergeant, Strategic Safeguarding Team
East Sussex NHS Clinical Commissioning Group (CCG)	Designated Nurse Safeguarding Adults
Sussex Partnership NHS Foundation Trust (SPFT)	Deputy Director of Social Work / Principal Social Worker (deputy chair)
SAB	SAB Development Manager

Each of the core members will nominate a deputy of sufficient seniority to fully act on behalf of the agency they represent, if they are unable to attend any meeting.

Co-opted members can be agreed, dependent upon the issue under discussion, and where their input will enhance the subgroup’s discussions and effectiveness of actions.

The meeting must have quorate membership of one representative from each of the statutory agencies, i.e. ASCH, Police and CCG.

Within the subgroup members are expected to:

- Contribute to the development of the subgroup as an effective, efficient and inclusive team.
- Raise concerns with the Chair as necessary.
- Share responsibility with partners for ensuring delivery of the work planned.
- Be responsible and accountable for delivering the subgroup's objectives through its' Work Plan.
- Participate in meetings both as a member of the SAR Subgroup and as a representative of their agency.

4. Chairing arrangements

The SAR subgroup will be chaired by the Head of Prevention from ESFRS, with the representative of SPFT acting as deputy chair.

5. Links with other subgroups

The SAR subgroup will link to other SAB subgroups where they have an important role to play in matters such as:

- Sharing learning and development needs identified through SARs with the Training and Workforce Development Subgroup.
- Initiate audit activity that may stem from SAR recommendations with the Performance and Quality Audit Subgroup.
- Sharing any communication and public interest matters from SARs to ensure that partners are aware of any implications for their organisation.

6. Meeting frequency and form

The SAR Subgroup will meet on a planned monthly basis. Meetings can be cancelled if there is no substantive business to discuss with at least 24 hours' notice given where possible.

Meetings will be held virtually via MS Teams or held at County Hall, Lewes.

The SAB Administrative Officer and SAB Development Manager will provide administrative support to the subgroup.

An agenda and papers for the meeting will be sent a week in advance of the meeting date. Members are expected to read papers in advance of meetings and have copies of relevant papers for reference within the meetings. Minutes will be kept of all meetings and circulated to the members after the meeting.

The subgroup may establish task and finish working groups with co-opted members from partner organisations to undertake specific activities in relation to SAR activity.

The referring person / agency will be invited to attend the SAR Subgroup to present their referral and be involved in the discussions on the case.

7. Decisions and escalation

Wherever possible, the subgroup will make decisions and recommendations based on consensus between members. Where there is not consensus, decisions will be made based on one vote per statutory partner.

In exceptional circumstances, where consensus cannot be reached, issues can be escalated to the SAB Independent Chair to provide direction.

Where decisions are required urgently outside of formal meetings these can be reached via email correspondence.

8. Accountability

The SAR Subgroup is accountable to the SAB and will report quarterly to the Board. The subgroup will collate an overview of all the cases that have been considered by the subgroup and SAR activity for inclusion in the SAB Annual Report.

9. Confidentiality and Data Protection

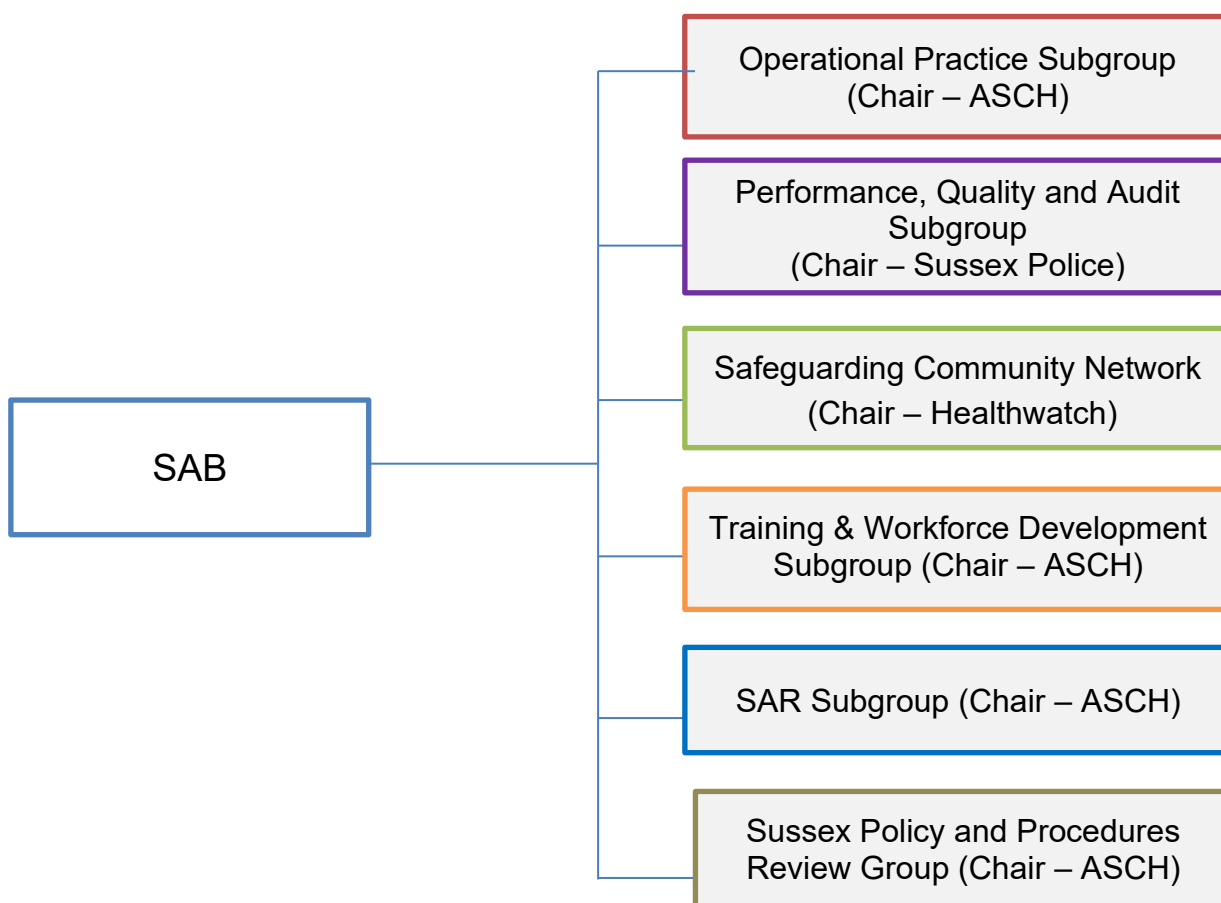
The subgroup will communicate with members electronically in accordance with the [Sussex Information Sharing Protocol](#), and compliance with the Data Protection Act 2018 and GDPR regulations.

All matters discussed at the SAR Subgroup will be confidential, and unless agreed, should not be divulged to other parties. All agendas, reports and other documents shall be treated as confidential unless and until they become public in the ordinary course of the Board's business. However, if information is discussed that would prejudice the welfare of the person(s) concerned and/or others, it will be the responsibility of the Chair to ensure that such information is handled appropriately.

10. Review

The TOR will be reviewed on an annual basis.

Appendix 3 – SAB subgroups



Operational Practice Subgroup This group co-ordinates local safeguarding work and ensures the priorities of the SAB are put into place operationally.

Performance, Quality & Audit Subgroup This group establishes effective systems for monitoring, reporting and evaluating performance across agencies, and links annual reporting to improvement planning. The group highlights staffing groups or service areas that require further awareness or training.

Safeguarding Community Network This network enables two-way communication and exchange of information between the SAB and clients and carers to improve safeguarding experiences and inform policy development. The network has expanded its membership to include organisations that support and represent people with disabilities, mental ill health and learning disabilities, together with older adults and carers.

Multi-agency Training & Workforce Development Subgroup This group is responsible for delivering the objectives of the training strategy, and overseeing training opportunities in key safeguarding matters affecting a number of agencies.

Safeguarding Adults Review (SAR) Subgroup This consists of the statutory partners of the East Sussex SAB and meets monthly with the purpose of

considering cases that may require a safeguarding adults review, and makes a recommendation to the SAB Chair.

Sussex Policy and Procedures Review Subgroup This consists of the statutory partners of the SABs across Sussex, with the purpose of reviewing and updating the safeguarding procedures in line with any policy and legal updates.