

**Safeguarding performance and quality assurance framework**

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# 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)

## Safeguarding and mental capacity competency frameworks

The East Sussex SAB has adopted the [National Competency Framework for Safeguarding Adults](https://www.eastsussexsab.org.uk/documents/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](https://www.rcn.org.uk/professional-development/publications/pub-007069) (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.

## 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.

## 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.

## 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.

## 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.

## 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.

## 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.

## 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.

## 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](https://www.eastsussexsab.org.uk/documents/sussex-sar-protocol/), which includes details of the referral process, methodologies and templates is contained within the [Sussex Safeguarding Adults Policy and Procedures](http://sussexsafeguardingadults.procedures.org.uk/).

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.

## 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](https://www.eastsussexsab.org.uk/documents/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.

## 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.

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# Appendix 1 – Performance, Quality and Audit subgroup terms of reference 2020

## 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 organisation. 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 learning 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 plan; disseminating learning and ensuring integration of recommendations into appropriate service plans (a separate panel is convened to undertake the Safeguarding Adults Review itself and develop the initial action plan).
* Monitor the effectiveness of the revised safeguarding policy and procedures, introduced in May 2019.

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

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

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| 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 |
| Operations Manager, Transitions Service | ASCH, ESCC |
| 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 Healthcare NHS Trust (ESHT) |
| Designated Nurse, Safeguarding Adults | East Sussex NHS Clinical Commissioning Groups (CCGs) |

It is anticipated that other members will be co-opted into the group, and any working group, as and when specific needs are identified, eg. when undertaking multi-agency audits.

## 3. 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 Deputy Chair and the SAB Development Manager. The PQA Chair will attend SAB meetings annually to provide a formal update from the group.

## 4. Quorum and attendance

As a minimum, the meetings will be deemed quorate when at least four members are present. The three statutory partners, ASCH, police and CCGs, must be represented. It is expected that each agency will send a fully briefed representative (or nominated deputy) to every meeting.

## 5. Terms of reference review date

The subgroup’s terms of reference will be reviewed annually (or sooner if warranted).

## 6. Administration of the group

The SAB Administrator will support the subgroup. They will organise dates, times and venues for the meeting and will coordinate the collection of agenda items. Agenda items will be called for by members of the group approximately one month in advance of the meeting. The final agenda, notes of the last meeting and the PQA work plan will be circulated at least one week in advance of meetings.

## 7. Chairing of the group

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

## 8. Frequency and duration of meetings

Meetings will be held on a quarterly basis with additional meetings to be scheduled if required to complete two multi-agency safeguarding audits each year, subject to other PQA business and priorities.

## 9. Venues for meetings

St Mary’s House, Eastbourne or via MS Teams.

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# Appendix 2 – Safeguarding Adults Review (SAR) subgroup terms of reference

## Function

* To consider cases that may require a Safeguarding Adults Review, and to make a recommendation to the SAB Independent Chair.
* To initiate multi-agency partnership reviews, single agency reviews or audits 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.
* To inform and enhance frontline practice through working within the performance and quality assurance framework of the SAB.
* To ensure that all reviews consider the involvement of the adult.
* To ensure that family members are encouraged to engage when appropriate in all relevant review processes.
* To ensure that practitioners are involved in all review processes.
* To raise awareness of staff in all SAB agencies of the outcomes from local and national reviews.
* To develop, monitor and review SAR action plans, and feed this into the quarterly Performance, Quality & Audit subgroup.
* Ensure links are established and maintained with other Boards and processes where required, for example, criminal investigations, DHRs, SCRs.

## Membership

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| --- | --- |
| ASCH | * Head of Adult Safeguarding (Chair) * Principal Social Worker * Operations Manager – Safeguarding Development Team (to attend as required) |
| NHS | * Designated Nurse Safeguarding Adults, Clinical Commissioning Group (CCG) * Head of Safeguarding (Adults and Children), East Sussex Healthcare NHS Trust (ESHT) * Deputy Director of Social Work / Principal Social Worker, Sussex Partnership NHS Foundation Trust (SPFT) |
| Police | * Safeguarding Lead Rep., Strategic Safeguarding Team |
| SAB | * SAB Development Manager |

If a member is not able to attend, they are to send a suitable representative. Where this is not possible, information can be requested and sent electronically. Advice from Legal Services will be sought as and when required.

The named GP for Safeguarding and the SAB Quality Assurance & Learning Development Officer will be co-opted into the subgroup where required.

## Chair

Head of Adult Safeguarding.

## Frequency of meetings

Monthly planned meetings – to be cancelled if no business to discuss with at least 24 hours’ notice given where possible

## Administration

The SAB Manager and the SAB Administrative Assistant will support the subgroup.

## Accountability

The subgroup is accountable to the SAB, and will report quarterly to the Performance, Quality & Audit subgroup.

# Appendix 3 – SAB subgroups

SAB

Operational Practice Subgroup

(Chair – ASCH)

Performance, Quality and Audit Subgroup

(Chair – Sussex Police)

Safeguarding Community Network

(Chair – Healthwatch)

Training & Workforce Development Subgroup (Chair – ASCH)

SAR Subgroup (Chair – ASCH)

Sussex Policy and Procedures Review Group (Chair – ASCH)

**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.