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| NCSAB RGB | **Nottingham City Safeguarding Adults Board.**  **Annual Action Plan**  **Year 3 (2018 -2019)**  **Embedding** |

**Annual Action Plan for 2018-9 – update following BMG 11th July 2018**

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| **RAG Rating key** | |
| **Clear** | Work is underway and, in the judgment of the lead individual/subgroup is expected to be completed within the agreed timescale |
| **Red** | Work is underway however, is not expected to be completed within the agreed timescale. In the judgement of the lead individual/subgroup either   * The deadline will be missed by more than three months and / or * The impact of missing this deadline is likely to be significant |
| **Amber** | Work is underway however, is not expected to be completed within the agreed timescale. In the judgement of the lead individual/subgroup either   * The deadline will be missed by less than three months and / or * The impact of missing this deadline is unlikely to be significant |
| **Green** | Action completed |
| **Blue** | Action not yet commenced. |

**Summary of Work Achieved in 2017/18 (Strategic Plan year 2)**

Prevention:

* The Board has developed ‘Top Tips’ for frontline staff working with adults in care homes, and in their own homes receiving home care. This has been disseminated to board partners and the impact will continue to be evaluated in 2018/9
* Adult Social Care have piloted ways of working to address social isolation, as one of a number of national pilots aimed to reduce the impact of social isolation and its link to safeguarding.
* The Board has produced and distributed posters to raise awareness of safeguarding, in public settings and in particular in care homes.

Assurance

* A new framework is in development for partners to self-assess their safeguarding arrangements. This will continue into 2018/19.
* The Independent Chair met with all board partners to review their assurance arrangements and reported findings to the Board.
* The review of the SAR processes which commenced in 2017/18 was completed and agreed jointly with Nottinghamshire SAB.
* Action plans from SARs completed in 2017/18 have been progressed and substantially implemented.
* On-going liaison with NCSCB and the CDP to share learning across SCRs, SARs and DHRs.
* A Complex Case Review process has been developed to identify multi-agency learning for cases which do not meet the criteria for a SAR. This will be piloted in 2018/9.
* The Quality Assurance Framework has been implemented and the Board, through the QA subgroup, has received more streamlined safeguarding data and trends.

Making Safeguarding Personal

* Assurance has been sought from all partners regarding Making Safeguarding Personal, and early intervention in safeguarding. Partners were asked to ensure citizens are asked before a safeguarding referral is made. The impact of this will be reviewed in 2018/9.
* MSP awareness-raising session delivered as part of Every Colleague Matters for the 2nd year running.
* New National guidance around implementing MSP has been reviewed, and partners have been asked how they will implement this in practice in Nottingham. This will continue in to 2018/19.

Safeguarding Performance and Capacity

* Board budget agreed for 2018/19
* A new Training, Learning & Improvement subgroup has been established, and has begun to scope resources to act on learning from SARs. This will continue into 2018/19.
* Some work has begun to develop the Board’s engagement strategy. This will continue into 2018/19.
* The NCSAB webpages have been revised and updated.
* The revised Board Constitution was agreed, including a new complaints and escalation policy.
* Reporting arrangements for cross cutting themes have been agreed between the Safeguarding Board and other strategic partnerships.
* A six-monthly desktop audit has been established to benchmark the Board’s performance against the Care & Support Guidance and other national guidance

***NB At the time of drafting –July 2018 – the Board Manager post is just filled, part time, after several months vacant. Consequently, there have been significant limitations to the implementation of this plan and some timescales have not been finalised***

|  | **What do we want to achieve** | **What we are going to do** | **Who will lead** | **Timescale** | **RAG rating**  **(**🡻🡹🡺) | | | **Updates** |
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| **Strategic Priority 1) Prevention** | | | | | | | | |
| **1.1** | The Board develops a better understanding of the impact of social isolation on people in Nottingham and implications for prevention work in adult safeguarding | 1. Review outcomes from national pilot sites & identify how learning can be implemented in Nottingham. | Board Manager/Board | National evaluation due April 2018– to follow this | **B** | |  | *The national evaluation has been completed in July and has not yet been reviewed by BMG or the Board manager, but a report will be brought to Board asap.* |
| 1. In the light of 1.1a) scope (who, what, where, when) areas and possible actions where partners might co-operate to reduce social isolation where this will reduce safeguarding risks. Scoping to include different approaches to safeguarding adults which address social isolation outcomes, which if feasible could be piloted by partner agencies. 2. Pending the effectiveness of 1.2a) below, consider developing a ‘Top Tips’ to reduce social isolation. | BMG/Board  TLI |  | **B** | |  |
| **1.2** | Safeguarding incidents in regulated providers are reduced as frontline practitioners know what to look out for as early warnings, and how to respond. | 1. Partners to evaluate the impact of the ‘Top Tips’ disseminated in Dec 17. 2. Referral data to be reviewed to identify any changes. 3. Consider whether any changes to the ‘Top Tips’ are needed as a result of evaluation of impact | 1. Business Support to chase non-responders 2. QA 3. TLI |  | **G** | |  | *Evaluations were received from ASC, CCG and CityCare which were positive and the ‘Tips’ have been well received. They are being built in to the revised multi-agency Policy and Procedures. Data shows no significant impact* |
| **1.3** | A shared understanding of what ‘early intervention’ in safeguarding is.  Reduction in the number of referrals to social care for safeguarding that do not progress to S42 enquiries but action is taken by relevant agency to support the citizen and avoid a safeguarding intervention. | 1. Adult Social Care to meet with agencies to review practice and identify any changes arising that might involve other subgroups | ASC / BMG | April 2018 and onwards | **A** | |  | *ASC lead has met with Police and Community Protection and continues dialogue with them. QA subgroup undertaking a deep dive of 10 cases to review early interventions* |
| **1.4** | In the context of reduced reviewing capacity in ASC and shared responsibilities to safeguard Nottingham people, the Board takes the opportunity to identify how partners can contribute to mitigating risks arising from the reduction in reviews by ASC | Establish a Task and Finish group to identify the role other organisations might play and to make recommendations to the Board | ASC Head of Safeguarding and Quality to lead T&F group and involve partner organisations as appropriate | Report to BMG in October 2018 and Board in December 2018 | **A** | |  | *Difficulties setting up meetings but first meeting in August* |
| **Strategic Priority 2) Assurance** | | | | | | | | |
| **2.1** | Assurance that Safeguarding arrangements in the City are effective, person centred and outcome focussed.  The Board receives assurance from all partner agencies on the effectiveness of their safeguarding arrangements | 1. New self-assessment framework to be completed & agreed with NSAB 2. All partner agencies to complete self-assessment (*must include assurance about training, now the QA training scheme has ceased and that a “Think Family’ approach is promoted)* 3. Relevant non-Board agencies (inc. housing) to complete self-assessment. 4. Effectiveness and impact of the new self assessment to be evaluated once completed. 5. All partner agencies to provide assurance that risks to safeguarding arrangements through budget reductions have been mitigated. | QA  QA  BMG/Board | Report to June Board  By 3 months after approval  Report to December Board  Independent Chair to make proposals to June Board | **R** | |  | *Process has brought out various concerns about what is effective or necessary and potential duplications. Joint meeting of QA subgroups in City and County to review and develop proposals.*  *As a result of consequent delays, no assurance exercise has been completed with the Board agencies – to be discussed with Board in September.*  *Questionnaire has been sent to agencies for assurance on (e)* |
| **2.2** | Assurance that learning from SARs (and other serious incidents) is embedded across the partnership, to achieve continuous improvement of local safeguarding arrangements. | 1. Pilot, evaluate, implement & review the complex case review process. | SAR subgroup | Aim for process in place June and review at year end | **C** | |  | *Process in place and case being considered by the SAR subgroup*  *Good level of assurance about implementation within agencies but gaps in meetings of TLI subgroup and absence of a Board Manager has meant learning and development beyond agencies has not happened*  *c) Without Board Manager, SAB has not participated but members of SAR subgroup have shared their knowledge of these*  *SAR subgroup has built in learning from the regional analysis*  *Board members to be surveyed in 2019* |
| 1. The recommendations and plans from the three SARs completed in 2016-7 and from complex case reviews will continue to be implemented. This includes ensuring that lessons learned are disseminated in learning & development initiatives | SAR subgroup to hold action plans, review SAR action implementation, and TLI subgroup to develop learning methods |  | **R** | |  |
| 1. Implement and keep under review the protocol to share learning from DHRs, SCRs and SARs across the partnerships and across City/County as appropriate. | Board Manager (in collaboration with Children’s Board officer & DV Policy Officer) /SAR subgroup |  | **A** | |  |
| 1. Review learning from regional SAR analysis and other serious incident reviews and apply to Nottingham. 2. Board members to engage with their frontline staff on areas of difficulty in practice particularly as arising from SARs and complex case reviews | Board Manager, SAR s/g, informed by partner agencies (with tasks delegated to QA or TLI as appropriate)  Board members | Survey of involvement at year end | **A** | |  |
| **2.3** | The board is assured that the voluntary sector in Nottingham has access to safeguarding information and training | 1. Work with NCVS to ensure on-going link between 3rd sector & NCSAB, 2. Identify and/or develop free training resources and other relevant information which can be made available via the NCSAB website and other appropriate methods | BMG  TLI and Board Manager |  | **G** | |  | *Good liaison and participation with NCVS and VAPN*  *b) Gaps in meetings of TLI subgroup and absence of a Board Manager has meant this work has not happened* |
| **R** | |
| **2.4** | The Board is assured about the quality of safeguarding practice (as part of its QAF), and areas for improvement are identified and acted upon | 1. Seek assurance on implementation of change for any areas of concern arising from the self assessment process 2. In the light of the complex case review process, and regional best practice guidance, consider the development of a process for multi-agency casefile audit | QA  QA subgroup to review potential once complex case process in place |  | **R** | |  | *Delays in being able to reach decisions on replacing the SAAF have meant this has not been done*  *b) BMG decision that with the complex case review process, other forms of QA, and capacity, this should not be progressed* |
| **2.5** | The Board is assured that safeguarding risks resulting form organisational and service change are identified and mitigated | * ? With NSAB? Partner organisations and relevant partnerships are invited to add safeguarding risks to their quality and equality impact assessments | BMG | Proposal in report from Independent Chair to June Board | **C** | |  | *Await outcome of questionnaire and then Chair to liaise with NSAB* |
| **Strategic Priority 3) Making Safeguarding Personal** | | | | | | | | |
| **3.1** | The Board is assured of strong multi-agency commitment to MSP across the partnership.  The principles of MSP are embedded in local safeguarding practice and make safeguarding person-centred and outcome focussed. | 1. Review learning from national MSP guidance to identify priority actions for Nottingham 2. Evaluate the impact of introducing a mandatory outcomes question for all safeguarding referrals 3. Identify actions arising from impact of b) above 4. Regular reports on MSP implementation to be provided to the Business Management Group and exception reporting to the Board. 5. Present regular case studies to the Board | Board manager with QA Subgroup  Board manager with QA Subgroup  SAR subgroup to identify suitable cases |  | A | |  | *Without Board Manager, (a) has not been undertaken; QA subgroup undertaking (b); BMG decided that (d) is too vague to be actionable and should be removed from the plan. (e) in place* |
| **3.2** | The Board has improved means of engagement with adults at risk, including people who have experienced safeguarding services | 1. Partner agencies are encouraged to identify ways in which their existing engagement activity can contribute to the Board’s engagement strategy 2. Establish formal relationship with local advocacy providers, including invitation to attend NCSAB | Board Manager and TLI  Independent Chair to invite | To June Board | A | |  | *(a) has not been actioned; Chair has met with PoHwer and agreed they will not attend the Board but will report to December Board* |
| **3.3** | The Board is informed of learning through complex case reviews and multi agency audits of any obstacles to implementation of MSP | 1. Ensure that the complex case review provides assurance (or intelligence about the obstacles to MSP in practice) | SAR s/g, QA, TLI |  | G | |  | *This is in place in the complex review process* |
| **Strategic Priority 4) Safeguarding Performance and Capacity** | | | | | | | | |
| **4.1** | Assurance that suitable, sustainable arrangements are in place to achieve continuous learning and improvement across the adult safeguarding partnership | 1. Agree workplan & priorities for the TLI subgroup 2. Keep the TLI strategy under review to ensure effectiveness and mitigate risk arising from lack of board capacity (no training officer) | BMG |  | | A |  | *TLI subgroup has a new Chair and held its first meeting this year in June so the future is more promising but absence of Board Manager and part time appointment make implementation difficult* |
| **4.2** | Assurance that members of the public are aware of Adult Safeguarding, what to look out for, how to refer. | 1. Review referral data following distribution of posters 2. Review outcome of Healthwatch safeguarding survey 3. Review outcome of additional question in the adults social care survey | Board Manager/TLI subgroup |  | | A |  | *Board Manager meeting with ASC data manager; Healthwatch report to June Board but follow up actions need TLI subgroup and Board Manager action when feasbile* |
| **4.3** | Assurance that there are effective methods for communication with Nottingham citizens and the workforce. | Implement Comms & Engagement Strategy devised in 2016/17 jointly with NCSCB | | | | | | |
| 1. Continue to develop the NCSAB Website to make tools, resources and learning accessible. | Board Manager,/TLI subgroup |  | | R |  | *For reasons described above there has been no progress with this* |
| 1. Develop comms & engagement toolkit based on the insight map | Board Manager /TLI subgroup |  | | **R** |  |
| 1. Annual calendar of campaign priorities which will be delivered using a multi-agency approach | Board Manager/TLI subgroup |  | |  |  |
| **4.4** | A shared view about the Board’s financial requirements, and 2019/20 budget for Board administration and management agreed in principle | In collaboration with NCSCB: | | | | |  |  |
| 1. Identify budget needs and options for 2019/20 | Funding Partners/ Independent Chair /Board Manager |  | | **B** |  |  |
| 1. Confirm partner contributions for 2019/20 budget | Funding partners/Independent Chair / Board Manager |  | | **B** |  |
| **4.5** | Ensure the Board’s work is aligned with work of other strategic Boards across the City. | 1. Ensure reporting arrangements for cross cutting themes are embedded.   To include:   * Housing & homelessness * Prevent * Modern Slavery * FGM * DSVA * Suicide Prevention * Community Protection | Independent Chair & Board Manager | Continuing | | **A** |  | *Process in place for assurance reports to be received on these themes; liaison with relevant officers diminished with absence of Board Manager* |
| **4.6** | Multi-agency policy & procedures that have taken account of recent learning and developments | 1. Work with NSAB to review multi-agency policy & procedures. To include:  * Increased focus on MSP * Learning from IICSA/equinox * Strengthened section on self-neglect to include work completed by DSVA safeguarding group on non-engagement * Information sharing agreements/GDPR | ASC Head of Safeguarding and Quality, Board Manager, BMG |  | | **A** |  | *Joint work to revise procedures progressing with the County and timeline for completion and launch in place; separate guidance on self neglect also being developed* |