
Brighton & Hove Safeguarding Adult Board Quality Assurance Framework 2016–19

Safe in the city

Brighton & Hove Community Safety Partnership



**Brighton & Hove
City Council**



Brighton and Sussex
University Hospitals **NHS**
NHS Trust



Sussex Community **NHS**
NHS Foundation Trust

Kent
Surrey
& Sussex
Community Rehabilitation Company



Sussex Partnership **NHS**
NHS Foundation Trust

National
Probation
Service



NHS
England

NHS
Brighton and Hove
Clinical Commissioning Group

healthwatch
Brighton and Hove

South East Coast Ambulance Service **NHS**
NHS Foundation Trust

The Quality Assurance Subgroup of the Brighton & Hove Safeguarding Adult Board have developed this Quality Assurance Framework to give assurance that the Board 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.

This Quality Assurance Framework is also a key mechanism by which the SAB holds local agencies to account for their safeguarding work, including prevention and risk management.

Introduction

Brighton & Hove Safeguarding Adults Board (B&HSAB) has a duty to ensure the effectiveness of what organisations and agencies do in order to safeguard and promote the safety and wellbeing of adults at risk in the City. Effective work in this area will contribute towards achieving better outcomes for adults at risk and protection them from significant harm.

This framework has been developed taking account of the Care Act 2014 and Care and Support Statutory Guidance, March 2015.

National context

The Government's policy on safeguarding adults was set out in May 2011 and re-issued in 2013, when 6 principles were identified for local authorities, housing, health, the police and other agencies to follow and use for monitoring safeguarding arrangements.



Care Act 2014

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

Association of Adult Social Services (ADASS) and the Local Government Association (LGA)

This framework reflects the **Standards for Adult Safeguarding** (ADASS; LGA, Dec 2012) and also reflects messages in relation to Safeguarding Adults Boards set out in the ADASS paper **Safeguarding Adults: Advice and Guidance to Directors of Adult Social Services** (ADASS; LGA, March 2013).

In June 2013 ADASS published **Making effective use of data and information to improve safety and quality in adult safeguarding** which provides 10 tips in relation to Safeguarding Adults Boards effectively using data and information to improve safety and quality in safeguarding adults:

1. Spend time on making sure data and information supplied is useful
2. Interrogate the data and information presented
3. Beware of overwhelming people with data and information
4. Use and develop the mechanisms you have
5. Have sound protocols in place to share data and information
6. Establish a method to share concerns about regulated health and social care services
7. Use community safety data and information
8. Route concerns to the right place
9. Find ways to support staff that may need it
10. Make data and information, like safeguarding, everybody's business

NHS

In March 2013 the NHS Commissioning Board produced a document **Safeguarding Vulnerable People in the Reformed NHS Accountability and Assurance Framework**, which states NHS organisations – whether as commissioners or providers of NHS funded care – must demonstrate strong local leadership, work as committed partners and invest in effective co-ordination and robust quality assurance of safeguarding arrangements.

Social Care Institute for Excellence (SCIE)

Post Care Act 2014 the Social Care Institute for Excellence (SCIE) offered guidance to SABs to support them to seek assurance of the effectiveness of safeguarding activity and ensure safeguarding practice is continuously improving and enhancing the quality of life for adults with care and support needs and carers, in line with **'Making safeguarding personal'**.



The guidance identified the following mechanisms for QA:

- data recording, analysis and reporting, case audits & SAB and agencies' self-audits & peer review
- safeguarding adults reviews
- practitioners' forums to share lessons from case audits and local good practice, from research and from safeguarding adults reviews
- 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
- the implementation of 'Making safeguarding personal' at a local level and its impact on engagement and outcomes.

SCIE advised 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
- qualitative reviews and audits.

Local Context

The Brighton & Hove Safeguarding Adult Board (B&H SAB) is a group of statutory, private, voluntary, and independent organisations across Brighton & Hove who work together to empower and protect some of the most vulnerable members of our community

The SAB provides the strategic leadership for safeguarding work and is committed to partnership working. The Board needs to assure itself that;

- local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance,
- safeguarding practice is person-centred and outcome-focused,
- agencies are working collaboratively to prevent abuse and neglect where possible,
- agencies and individuals are providing a timely and proportionate response when abuse or neglect have occurred, and
- safeguarding practice is continuously improving & enhancing the quality of life of adults in the area.

The remit of the Board is not operational but one of co-ordination, planning and commissioning and contributes to the wider goals of improving the well-being of adults.

All partner organisations in Brighton & Hove prioritise safeguarding with an approach based on promoting dignity, rights, respect, helping all people to feel safe and making sure safeguarding is everyone's business.

What is Quality Assurance?

Quality assurance is about assessing the quality of the work we undertake to safeguard vulnerable adults and understanding the impact of this work in terms of its effectiveness in helping to keep vulnerable adults safe. Effective quality assurance will contribute to a culture of continuous learning and improvement.

The primary challenge of quality assurance is to improve the quality of practice and safeguarding outcomes for vulnerable adults.

What is the QA Framework?

The framework is for strategic partnerships and individual organisations with safeguarding adults' responsibilities in Brighton & Hove.

The framework is based on an 'Outcomes Based Accountability' (OBA) approach which will help those with leadership, senior management or scrutiny responsibility for safeguarding adults to gain a better understanding of how safe adults at risk are in their services and communities by considering:

- What we do
 - How well we do it – are partners working well to respond to safeguarding concerns?
 - What difference we have made/is anyone better off? - do safeguarding arrangements improve outcome for adults at risk
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Types of data:



There are three types of performance information/measures as follows;

Quantitative information

This will help to inform *What we do*. It answers the questions: 'How much/how many?'

Qualitative information

This will tell us more about *How well we do it*. It is concerned with the functioning of the organisation, the quality of what was done

Outcome information

This tells us *What difference we have made* (through our services, strategies and interventions) to the lives of vulnerable adults, namely 'is anyone better off.' For example, the percentage of cases in which domestic violence has ceased.

Traditionally, quality assurance information in safeguarding has focused largely on quantitative information, with some qualitative information and very little outcome information. The challenge is, over time, to increase the proportion and importance of outcome information as this constitutes what really matters, supported by qualitative information and then quantitative information.

Principals Underpinning the Framework

Good quality safeguarding arrangements are underpinned by the following key principles:

Empowerment

People being supported & encouraged to make their own decisions and give informed consent

I am asked what I want as the outcomes from the safeguarding process, and this directly informs what happens

Prevention

It is better to take action before harm occurs.

I receive clear and simple information about what abuse is, how to recognise the signs, and what I can do to seek help

Proportionality

The least intrusive response appropriate to the risk presented.

I am sure that the professionals will work in my interests as I see them, and they will only get involved as much as needed

Protection

Support and representation for those in greatest need

I get help and support to report abuse and neglect. I get help so that I am able to take part in the safeguarding process to the extent to which I want

Partnership

Local solutions through services working with their communities. Communities have a part to play in preventing, detecting and reporting neglect and abuse.

I know that staff treat any personal and sensitive information in confidence, only having what is helpful and necessary. I am confident that professionals will work together and with me to get the best result for me

Accountability

Accountability and transparency in delivering safeguarding.

I understand the role of everyone involved in my life and so do they.

The Quality Assurance Framework is also underpinned by the following principles:

- **Openness and transparency:** each agency within the SAB is likely to know where good practice, areas for development and risk lies in its own organisation. The SAB needs to be assured agencies have identified and acted upon risk and areas of development, or to be enabled to do so as a multi-agency Board. All partners must bring good practice, areas for development and risks to the table so that the Board can agree how they can be mitigated. Some will be single agency actions and some will require multi agency action.
 - **Outcomes:** good quality safeguarding arrangements should be person-centred, defined by the individual, outcomes-based and making a difference, in line with ***Making Safeguarding Personal*** – i.e. to what degree do our safeguarding arrangements deliver what is important to adults at risk and the outcomes they want to achieve.
 - **Triangulation:** that different qualitative and quantitative information sources need to be compared and contrasted to cross-verify the data and validate any conclusions being drawn. This will enable the Board more confidently to understand whether arrangements are effective and making a positive difference.
 - **Support learning & Improvement:** What we do with the information collated is as important as the quality of information we collect. Therefore, the learning from quality assurance will be shared with partners and used meaningfully to change practice and improve outcomes for clients and carers.
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Sources of information

Information will come from the following sources

- Organisational performance / activity data
- Case Records
- Experiences of Frontline Staff and Managers
- Experiences of clients /carers

By and large, organisational performance / activity data and case records have been the two main sources of information used in safeguarding quality assurance. Whilst it is recognised that these are important and valuable sources, to get a full picture of what is really happening, it is important to capture the experience of client /carer/s, and the experience of frontline staff and managers.

All partner organisations will need to consider how they collate quantitative, qualitative and outcome-based information from the four sources to inform improvement activity in respect of their safeguarding practice.

Organisational performance / activity data

Clear, comprehensive range of performance information supports an understanding of effective safeguarding practice. It is at the heart of the drive to secure continuous improvement and delivery of high quality services.

Parents and children's case records

The case records held by an organisation, in whatever format, will be a rich source of information.

Case record 'auditing' involves the systematic analysis of records by staff with relevant professional expertise, in order to glean the required information from a sufficient sample of cases to provide a picture of what is going on through aggregating the case findings.

The experience of clients/ Carer/s

Did I listen to you and take account of your views?

Did I treat you with respect?

Did I make a difference to your life in terms of keeping you safe and well?

Obtaining the views of clients/ carers in safeguarding work is underdeveloped because it is hard to do, especially in what can be the fraught nature of safeguarding work. Yet it is clearly a rich seam, not just in terms of understanding the quality and impact of services now, but as a source of learning and organisational development.

It's important to know how clients/ and carer/s feel they are treated by the professionals and agencies they interact with. If their experience of such interactions is negative, this is likely to have an adverse impact on outcomes. Understanding what matters in terms of engagement and interaction, and whether this is something they experience in reality (and therefore identifying what professionals and agencies need to get right) is something only clients and carer/s can tell us.

The experience of front-line staff / managers

Staff and frontline managers will often know about the quality and impact of their own services, and those of partner agencies they work with. Safeguarding Adult Reviews have highlighted the false assurance between what is meant to happen in terms of policy and procedure, and what actually happens. It is important to have a constant feedback loop from the frontline to keep senior management and those with governance responsibilities 'reality-based'; not just in terms of what is or is not working, but to assist with ideas for improvement so that changes can be made systematically.

The Quality Assurance Framework

Elements of the Framework

1. **SAB Self - Assessment** of strategic and organisational arrangements to safeguard and promote the wellbeing of Adults at Risk. (Adults equivalent of the children's Section 11 Audit). This tool has been developed to provide all organisations in the city with a consistent framework to assess monitor and improve their Safeguarding Adults arrangements and can be used by a wide range of organisations.
2. **Data/Performance** – a range of data will be required from partner agencies/organisations to inform Board Quality Indicators/Data/Performance Report. The aim is to use this information to enable the B&H SAB to understand the prevalence of abuse/ neglect, highlight themes and trends in safeguarding activity, and identify issues that need addressing in safeguarding arrangements. The information should cover trends in reported abuse, partnership working to respond to safeguarding concerns, and outcomes (whether clients feel safer as a result). As far as possible data from across the safeguarding partnership that is already collected and used by individual agency management teams to monitor the effectiveness of their individual safeguarding arrangements, will be utilised.
3. **Memorandum of Understanding / Duty of Candour** – the Board Quality Assurance Framework places a duty of candour on all partner agency/organisation – this in practice will mean there is an expectation that all partner agencies and organisation will notify the Board of any issues of concern – such as poor regulatory inspection outcome, serious incidents, issues that might attract media attention, safeguarding red risks on their organisations risk register etc.
4. **User experience** – understanding their journey. All partner agencies should have processes in place to understand the service user experience of their service. B&H SAB is particularly interested in adults' experiences of the safeguarding adults process – therefore this framework places a duty on agencies/ organisations to ascertain people's safeguarding experience and report them to the Board, via the QA Subcommittee, so that their experiences can inform the work of the Board.
5. **Training/Competency** –ensuring training is sufficient, positively impacts on practice and in turn improves outcomes for adults with care and support needs in Brighton & Hove, and staff working with adults with care and support needs are skilled and competent across all sectors. The Learning & Development Sub Group will lead on this area of work.
6. **Single Agency Audits** – Each partner agency must have in place auditing arrangements to assess the quality of their day to day safeguarding adults work. The QA Sub Group will ask, annually, to review such arrangements or ask partners to share findings.
7. **Multi-Agency Audits** - Each year the QA Sub Group will review and update a Quality Assurance Programme for approval by the B&H SAB. Twice a year the SAB QA Sub Group will undertake themed audits, as proposed in the Programme. Where ever possible the experience of adults at risk will be a key factor which may be ascertained through case tracking or direct feedback.
8. **Complaints** - Each partner agency must have in place arrangements for monitoring complaints to ensure safeguarding issues are identified and responded to early and quickly. The SAB reserves the right to ask partners to share complaints data.
9. **Safeguarding Adults Reviews** - (to establish whether there are lessons to be learned from the case in which local professionals and agencies work together to safeguard adults at risk). SAR's will also review the effectiveness of procedures and identify lessons for improvement. The Case Review Sub Group will monitor progress against action plans, highlighting any need for QA activity to the QA Sub Group.
10. **Annual Report** – The B&H Sab will publish, each financial year, an annual report to highlight, (a) what it has done during that year to achieve its objective, (b) what it has done during that year to implement its strategy, (c) what each member has done during that year to implement the strategy, (d) the findings of any Safeguarding Adults Reviews concluded in that year, and (e) the reviews arranged by it under that section which are on-going at the end of that year.

Learning & Improvement

Learning will be linked to the following areas:

- Training
- Team Meetings
- Workforce planning and development
- SAB Communication Strategy/Plan
- Policy & procedure
- Commissioning
- Supervision
- Partner Agency Improvement Plans
- SAB Business Plan
- Workshops and/or Interagency Forums

Briefings distilling learning from multi-agency activity will be distributed across the partnership on conclusion of action planning.

Consequently, it is important that the outcomes of the quality assurance activity inform the input of other SAB Sub Group – see Roles and Responsibilities below.

The Quality Assurance Sub Group will host a quality assurance event/s with other Sussex SABs, where the main messages from quality assurance are shared and considered. The event/s will allow members of the groups across Sussex to reflect on the information, determine the story, and agree what immediate action is required to improve practice or safeguarding arrangements. It will also be an opportunity to review the quality assurance programme for the following year and prioritise the themed areas.

Roles and Responsibilities

Individual agencies and organisations includes all statutory members of the board are responsible for:

- Their own quality assurance activity in relation to safeguarding
- Supplying information and data as required by this framework
- Ensuring appropriate representation on the QA Sub Group
- Participating the twice yearly multi-agency audits as defined by the QA Sub Group
- Notifying the SAB on any areas of concern – poor regulatory inspection outcome with regards safeguarding
- Request a Safeguarding Adult Review, as appropriate

Quality Assurance Sub Group

On the SAB's behalf, this Sub Group will be responsible for the co-ordination and management of the quality assurance framework see appendix C for the: Terms of Reference.

The Quality Assurance Sub Group will publish an annual report of themes and improvements made as a result of quality assurance activity conducted by partner agencies and through multi agency processes.

Other B&H SAB Sub Groups

Each of the sub committees has a different remit with the consistent theme of understanding and achieving better outcomes for adults at risk.

Each Sub Group is expected to work within this Quality Assurance Framework and:

- Provide the Quality Assurance Sub Group with data, information and reports as required by this framework.
- Respond to and receive requests from the Quality Assurance Sub Group
- Participate in audits as directed by the Quality Assurance Sub Group

Sussex Safeguarding Boards

The Quality Assurance Framework will, where possible work collaboratively with providers to ensure a pan-Sussex approach to quality and assurance to reduce duplication and work in partnership with other boards being mindful of localised needs and wider safeguarding thematics.

Brighton & Hove Safeguarding Adults Board

B&H SAB oversees the effectiveness of the arrangements made by individual agencies and the wider partnership to safeguard adults from abuse and is responsible for challenging all relevant organisations on their performance in ensuring that adults at risk are kept safer in the city.

The SAB will:

- Receive reports from Quality Assurance Sub Group
- Receive and scrutinise agreed performance information .
- Participate in SAB Development events with a focus on quality assurance.
- Work effectively with B&H's Health and Wellbeing Board and other Partnerships to ensure adults at risk are safeguarded from abuse and harm and their wellbeing is promoted.
- In accordance with the provisions of the Care Act, the SAB annual report will provide a detailed analysis of the effectiveness of safeguarding within Brighton & Hove. The report, through scrutiny of the evidence gained through the quality assurance programme, will highlight good practice and identify where (and how) improvements are to be made.
- Ensure the SAB Quality Framework informs the Business Plan.

Health and Wellbeing Board

The main functions of the HWBB are to:

- a) Assess the needs of the local population and lead the Joint Strategic Needs Assessment and development of a Joint Health and Wellbeing Strategy.
- b) Promote integration and partnership working between NHS, social care, education and public health.
- c) Support strategic joint commissioning and pooled budget arrangements, where all parties agree this makes sense.
- d) Assess the health, social care and public health commissioning strategies, plans and proposals developed by the GP Commissioning Consortium and the Local Authority.
- e) Lead on local health improvement and prevention activity.
- f) Supporting local voice and the exercise of patient choice.

The role of the Health and Wellbeing Board in Safeguarding Adults is to ensure safeguarding and adult protection are:

- Cross-cutting themes in all its work.
- Holistically addressed in local needs assessment; including by considering and addressing information provided by the SSAB on safeguarding priorities.
- Integrated into the development of the Health and Well-Being Strategy.
- Integrated into commissioning arrangements at both strategic and operational levels.
- Integrated into the Public Health agenda.
- Embedded and integrated into service arrangements.

The Health and Wellbeing Board will:

- Receive reports from B&H SAB.
- Receive the SAB Annual Report and Business Plan each year.

Appendix A: Quality Assurance Workplan

Priority Area 1: Embed practice change and improvement aligned with statutory arrangements implemented from Care Act 2014 and the Mental Capacity Act 2005.

Item	Work Task	Lead Person	Timescale	Progress
1.1	SAB is assured partner agencies have audit arrangements which focus on the six safeguarding principles of Empowerment, Prevention, Proportionality, Protection, Partnership and Accountability & can demonstrate that practitioners are delivering safeguarding outcomes that reflect choice and expectations of clients	<ul style="list-style-type: none"> QA Sub Group Chairperson – Brian Doughty, Interim Executive Director Adult Social Care SAB Business Manager – Mia Brown 	October 2016	<p>Jan:</p> <p>Missing returns:</p> <ul style="list-style-type: none"> Pavilions NPS SARC Portal <p>BHCC Housing noted not to have undertaken any QA activity – MB to follow up.</p>
1.2	SAB has a multi-agency audit programme which centres on the six safeguarding principles and assesses the outcome of safeguarding enquiries within and between agencies & demonstrates that practitioners are delivering safeguarding outcomes that reflect choice and expectations of clients [with a programme of follow up and re-audit on audit findings and/or recommendations.]	<ul style="list-style-type: none"> QA Sub Group Chairperson – Brian Doughty, Interim Executive Director Adult Social Care SAB Business Manager – Mia Brown 	December 2016	Completed October 2016: multi-agency audit programme agreed, with 2 theme audits a year.

1.3	SAB, via organisational 'health check'/ Pan Sussex Annual Self-Assessment, evaluates partner agencies structures and accountabilities	<ul style="list-style-type: none"> QA Sub Group Chairperson – Brian Doughty, Interim Executive Director Adult Social Care SAB Business Manager – Mia Brown 	March 2017 roll out	March 2017 roll out.
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Priority Area 2: Develop and strengthen quality assurance

2.1	SAB has a multi-agency audit programme which prioritises themes that are highlighted as being of high risk through client or professionals' feedback, Safeguarding Adult Reviews, Learning Reviews, previous audit or data. As per 1.2 above.			
2.2	SAB has an overview of the outcomes of single agency audits carried out within partner agencies. As per 1.1 above			
2.3	SAB is assured that audit findings and/ or recommendations are communicated to staff across the partnership	Audit Leads & SAB Business Manager	After first audit tba	<ul style="list-style-type: none"> SAB QA Briefing re DV circulated Dec 2016 Relevant Training Offers
2.4	SAB has mechanisms to promote Safeguarding Competencies, MCA and DOLs Gold Standards within and across all agencies & to assure itself that the competencies and standards are being met in all agencies See 2c & 2d on Business Plan.	To be referred from QA Sub Group to MCA Sub Group	Tbc with Soline Jerram	<p>August: Chair of MCA Sub group notified. October 2016: Chair of MCA Sub group reminded.</p> <p>Jan 2017: Chair has concerns MCA / Dols subgroup functioning</p>
2.5	SAB has a multi-agency data set which supports an overview of the effectiveness of multi-agency working & demonstrating the impact of safeguarding interventions.	QA Sub Group & Identified Performance Leads	April 2017	<p>August: Planning to take place in October 2016 re outcomes to measure and how to progress this</p> <p>October 2016 : Planning Group Members agreed. Meeting set up.</p>

Priority Area 3: Focus on Prevention and Early Intervention

3.1	QA Sub Group to work with (yet to be established) Participation & Engagement & Learning & Development Sub Groups so as SAB communications, training and audit inform one another current best practice recommendations and support improved outcomes for vulnerable adults.	QA Sub Group Chairperson, L&D Chairperson & P&E Sub Group Chairperson (when appointed) & SAB Business Manager	April 2017	<p>August: Progressing setting up relevant Sub Groups</p> <p>October 2016: Progressing setting up relevant Sub Groups</p>
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Priority Area 4: Community Awareness and Capacity Building

4.1	QA Sub Group to work with (yet to be established) Participation and Engagement Sub Group & PASA, to ensure communication strategies and mechanisms afford opportunities to both share key messages with service users, carers, communities and professionals and hear feedback on the quality of safeguarding systems and services	QA Sub Group Chairperson, PASA Chairperson & PASA Rep on QA Sub Group P&E Sub Group Chairperson when appointed & SAB Business Manager	April 2017	August: PASA representation on QA Sub Group and will be involved in QA activity as appropriate.
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Appendix B: Quality Assurance Programme

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'. This should address issues of quality as well as quantity, particularly from the perspective of those who have experienced safeguarding services

SABs need a range of approaches to quality assurance to monitor the effectiveness both of their own work and that of their partner agencies. Care Act, 2014

QA Content Areas	Q1 16-17 (Apr – Jul)	Q2 16-17 (Jul – Sep)	Q3 16-17 (Oct – Dec)	Q4 16-17 (Jan – Mar)	Proposed Type of Quality Assurance Activity
** Homelessness – Processes, Pathway & Practices.	-	-	-	X	Must incorporate learning points from X Review & Desktop review of Homelessness
*MCA & Dols Gold Standards	-	-	-	-	To be referred from QA Subcom to MCA Subcom Timescale TBA

QA Content Areas	Q1 17-18 (Apr – Jul)	Q2 17-18 (Jul – Sep)	Q3 17-18 (Oct – Dec)	Q4 17-18 (Jan – Mar)	Proposed Type of Quality Assurance Activity
Sussex SAB Strategic Assurance Self – Assessment	X	-	-	-	This is designed for use by Sussex SAB partner agencies to check whether or not their internal safeguarding arrangements are robust and to identify any aspects of their safeguarding arrangements in need of further development.
** Sexual Abuse	-	-	X	-	Lee Horner & James Rowlands to led.

*Priority areas of concern from SAB Business Plan

** areas identified in other SAB activity, e.g SARs, desktops reviews, multi-agency training, multi-agency performance data

Future content areas: Domestic Violence (re-audit); Prevent Duty; Self-Neglect; Making Safeguarding Personal; Neglect (service provision)

Safeguarding Adults Board (SAB) Quality Assurance subgroup Terms of Reference

Background

High-quality, personalised care and support can only be achieved where there is a vibrant, responsive market of service providers.

The overarching purpose of the SAB is to help and safeguard adults with care and support needs. It does this by assuring itself that local safeguarding arrangements are in place as defined by the Care Act 2014 and statutory guidance and assuring itself that safeguarding practice is continuously improving and enhancing the quality of life of adults in its area.

The Care Act 2014 provides that the SAB must lead adult safeguarding arrangements across its locality and oversee and coordinate the effectiveness of the safeguarding work of its member and partner agencies. This sub group is the vehicle for this work.

Purpose

To act as a sub group of the Brighton and Hove Safeguarding Adults Board (SAB).

Its purpose 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 will bring together managers from key agencies with responsibility for quality assurance. Members will be responsible for ensuring safeguarding performance and evaluation processes are established within their own organisations and developing and supporting multi-agency audits. Members will be committed to effective partnership working based on trust and open communication, as outlined in the Care Act 2014 and members will need to be aware of, and understand, the organisational frameworks within which different agencies work.

Objectives

1. Review data from key agencies to inform annual priority setting for the work plan of the Safeguarding Adults Board (SAB)
2. Develop and analyse a multi-agency data set to inform safeguarding practice
3. Develop and deliver a multi-agency audit programme which is informed by the BHSAB Business Plan, Safeguarding Adult Reviews, Local or National concerns and/or performance gaps.
4. Initiate, undertake or commission both multi-agency and single agency audits and reviews of safeguarding activities on a regular basis on behalf of the BHSAB to ensure compliance to Pan Sussex safeguarding procedures, – these will support monitoring adherence to the Care Act
5. Devise performance improvement actions to be incorporated into the annual work programme.
6. Progress and monitor recommendations from audit including, where necessary, re-audit.
7. Consider outcomes from the experiences of clients and carers, including complaints and compliments, case file audits, and client surveys, and ensure they influence service improvements. Where appropriate, include the views clients and carers who are receiving a service, in quality assurance work.
8. Include the views of practitioners / their managers who are providing a service, in quality assurance work (where possible)
9. Have sight of Safeguarding Adults Review (SAR) action plan/s, action planning undertaken by SAB and monitoring of action plan/s undertaken by SAB Safeguarding Review Sub group.
10. Have sight of learning from Domestic Homicide Reviews and Mental Health Homicide Reviews.
11. Ensure that needs arising from equality and diversity issues for adults are taken into account in all the work of the sub group

12. Receive reports from Quality Governance Group (BHCC), Quality Review Meetings (CCG), Safeguarding Committee (CCG), MARAC, & internal safeguarding audit reports from Sussex Police for quality surveillance.
13. Report findings from audit activity, by this sub group and other member agencies, to the Board on a regular basis and make recommendations for change to support improved practice and promote a learning culture. This may include recommendations for additional training; seminars or other media to disseminate good practice.
14. Where issues pertain to safeguarding vulnerable adults, this Sub group may task, and receive tasks, from other SAB sub groups and VAWG Operational Group.

As far as is practicable the work of the sub group will be aligned to the workstreams of other Pan Sussex Adult Safeguarding Boards. Audit tools and findings will be shared across Sussex.

Membership

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

Chairperson	DAS / Acting DAS
Head of Safeguarding (Adults), BHCC	Michelle Jenkins
Principal Social Worker, BHCC	Richard Cattell
Sussex Police	Ian Still / Lee Horner
Health Commissioning & Providers	CCG – Candy Gallingah SPFT – Andy Porter SCFT - David Feakes BSUH- Joanna Henderson
SAB Business Manager	Mia Brown
Performance Analyst	Philip Litchfield
Public Health, Adults , BHCC To cover Substance Misuse Provider services also	Stephen Nicolson
Probation Services <ul style="list-style-type: none"> • NPS • CRC 	Mark Burden Samuel Newbould or delegate
PASA Rep	Beatrice Gahagan or delegate
Community Safety	James Rowlands
BHCC Housing	Tracy John
SAB Participation & Engagement Chairperson	Stuart Hale – for information

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

Accountability

The group will take direction, carry forward, and report progress of its work plan to the BHSAB. The Chair of the QA sub group will be a full member of BHSAB.

Quorum

As a minimum, the meetings will be deemed quorate when at least 4 members are present.

Attendance

It is expected that each agency will send a fully briefed representative (or nominated deputy) to every meeting. The three statutory partners of ASC, Police and CCG must be represented.

Terms of Reference review date

The group's Terms of Reference will be reviewed annually (or sooner if warranted).

Administration of the group

The Team Administrator, Health & Adult Social Care BHCC, will provide administration for the meeting. They will organise dates, times and venue for the meeting and will coordinate the collection of agenda items.

Agenda items will be called for by members of the group approximately 1 month in advance of the meetings. The final agenda will be sent at least 1 week in advance of meetings. Notes of the last meeting will be circulated with the agenda for the next meeting. Work plan will be updated and circulated with the agenda for the next meeting.

Chairing of the group

The Group will be chaired by the Director of Adult Services BHCC

Regularity and length of meetings

Meetings will be held on a quarterly basis and will normally be booked for 1.5 hours

Venues for meetings

Meetings will be held in Hove Town Hall, or another central BHCC venue.