We have oversight of the quality of safeguarding performance

Feedback indicates that customers' desired outcomes are met, in line with Making Safeguarding Personal and the well-being principle.

We monitor how learning is shared and used to improve practice

We understand what the data tells us about where the risks are and who are the most vulnerable

We measure impact

We listen to the service user, raise awareness of adult safeguarding and help people engage

We work with communities to raise awareness of adult safeguarding

We raise awareness of the Board and the Berkshire Policy and Procedures

Board membership reflects a wide and varied group of stakeholders

West of Berkshire Safeguarding Adults Board

Reading, West Berkshire & Wokingham

West of Berkshire Safeguarding Adults Board Business Plan 2017-18

…is kept safe

…gets the outcomes they want

…. engages with services and the Board

The person in the centre…

…is supported by a skilled workforce

….receives safe, high quality services

We learn from experience and have a skilled and competent workforce

Learning is shared and used to improve practice

Development areas for 2017-18:

Safe recruitment	Allegations management
Record keeping	Self-neglect
Mental Capacity Act	Domestic Abuse
Mental Health	

High risk areas for 2017-18

Mental Capacity Act and DoLS

Self-neglect

Mental health

Domestic Abuse

We work together effectively to support people at risk

People are supported by an advocate when they need it

We work within a framework of policies and procedures that keep people safe

Providers are supported to deliver safe, high quality services

We provide feedback to people who raise a safeguarding concern

We have a modern slavery strategic pathway

West of Berkshire Safeguarding Adults Board Business Plan 2017-18

PRIORITY 1	We have oversight of the quality of safeguarding performance					
Outcome	**Action**	**Lead**	**Timescale**	**Work in progress**	**RAG**	**Success criteria**
1.1 Feedback indicates that customers' desired outcomes are met, in line with Making Safeguarding Personal and the well-being principle.	a) Develop a core set of questions to collect feedback to ascertain the extent to which service users felt that they had been involved, supported, consulted and empowered during the safeguarding process.	Safeguarding Leads in Wokingham, west Berkshire and Reading Councils	April 2017	West Berkshire has developed a set of questions which have been shared with Wokingham and Reading to adapt and adopt.	G	Core set of questions to collect feedback from people in place in each Council.
	b) Mandatory feedback form to be added to the Councils' electronic systems for every statutory S42 enquiry to capture feedback at the end of the S42 enquiry	Safeguarding Leads in Wokingham, west Berkshire and Reading Councils	June 2017	Assurance required from each LA when complete. West Berkshire has confirmed they have. Reading have a form to be launched Wokingham are working on implementation. BM to track progress in 18/19.	A	Mandatory feedback form added to the Councils' electronic systems for every statutory S42 enquiry.

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	c)	Develop systems for capturing, recording and monitoring MSP outcomes.	Effectiveness and Oversight and Quality Subgroups	Jan 2018	The principles of MSP are well embedded in the peer review case file audit.	**G**	Systems are in place and feedback indicates that customers' desired outcomes are met
1.2 We understand what the data tells us about where the risks are and who are the most vulnerable	a)	Audit outcomes are analysed by Oversight and Quality Subgroup and the Board takes required actions to address areas of identified concerns across partner agencies.	Oversight and Quality Subgroup	September 2017 and March 2018	An audit on S42 enquiries was undertaken in September 2047 which included to what extent Making Safeguarding Personal principles have been upheld, highlight report was taken to the board. There was no audit completed in March 2018. A number of audits have been set within the 18/21 Business Plan.	**A**	Improvements in practice are evidenced in subsequent S42 case file audits.
	b)	Develop a dashboard to present KPI data to the Board	Oversight and	December	Has gone live and is a	**G**	A clear overview of KPI

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Outcome	Action	Lead	Timescale	Work in progress	RAG	Success criteria
	on a quarterly basis	Quality Subgroup	2017	standing Board agenda item.	 	data is presented to the Board on a quarterly basis
	c) Develop understanding of local level of risk for victims of FGM by reviewing local and national FGM data	Oversight and Quality Subgroup	Annually – March 2018	Numbers of identified FGM victims in West Berkshire, is reported on the Boards Dashboard. Carried over to 18/21 Business Plan – Ref 1.75	A	FGM data provided supports the Board's understanding of local level of risk for victims of FGM
	d) Develop understanding of local level of risk for victims of Modern Slavery by reviewing local and national Modern Slavery data	Oversight and Quality Subgroup	Annually – March 2018	Dashboard reports on numbers of concluded S42 enquiries by type of abuse which includes Modern Slavery. Carried over to 18/21 Business Plan – Ref 1.76	R	Modern slavery data supports the Board's understanding of local level of risk for victims of modern slavery

PRIORITY 2 -We listen to service users, raise awareness of safeguarding adults and help people engage

Outcome	Action	Lead	Timescale	Work in progress	RAG	Success criteria

2.1 Board membership reflects a wide and varied group of stakeholders	a) Representatives from Housing and Provider organisations to be invited to attend Board meetings	Independent Chair	Sept 2017	Housing representative invited from each LA.	G	Representatives from Housing and Provider organisations attend Board meetings.
2.2 Local communities know about safeguarding adults and the work of the Board	a) Easy read version of the Board's Annual Report 2015-16 to be published	Communication & Publicity Subgroup	May 2017	CLASP commissioned to produce easy read version of 2015-16 annual report; published on website	G	Wider range of people are able to understand the Board's work and priorities
	b) Community Awareness Event to raise awareness of safeguarding adults	Communication & Publicity Subgroup	March 2018	Events held in each area.	G	Community Awareness Event held in each area.
	c) The Board is assured that accessible safeguarding leaflets for customers and staff are available	Communication & Publicity Subgroup	June 2017		G	Safeguarding information is available in public places and partner agencies' websites
	d) Map partner agencies' external communication channels	Communication & Publicity	Nov 2017		G	Subgroup aware of partners' external

		Subgroup			**G**	communication channels
	e) Develop calendar of local and national events relevant to safeguarding	Communication & Publicity Subgroup	Nov 2017		**G**	Local and national events relevant to safeguarding are promoted
2.3 Raise awareness across partner organisations and amongst practitioners about the role of the Board, the website and Berkshire Policy and Procedures	a) a) New Berkshire Policy and Procedures website launched and promoted	Berkshire Policy and Procedures Subgroup	Dec 2017	Website for the Berkshire Policy and Procedures complete and launched	**G**	New Berkshire Policy and Procedures website launched and promoted
	b) b) Produce flyer for practitioners to raise awareness of the Board	Business Manager	April 2017	Developed and distributed across partner organisations	**G**	Flyer circulated across all partner organisations.
	c) Present Board's Annual Report 2016-17 to Health and Wellbeing Boards and other committees	Independent Chair	January 2018	Annual Report complete and due to be presented to HWB in January.	**G**	Independent Chair presents Annual Report 2016-17 to HWB in each area by January 2018

PRIORITY 3 We learn from experience and have a skilled and knowledgeable workforce

Outcome	Action	Lead	Timescale	Work in progress	RAG	Success criteria
3.1 The workforce has the capacity, capability, knowledge and skills to keep people safe and	a) Opportunities for practitioners to explore issues when working with people in Domestic Abuse	Learning and Development Subgroup	May 2017	Quarterly DA Forum established in Reading. Good attendance from a	**G**	Practitioners understand the dynamics of DA in terms of coercion and

improve safeguarding outcomes		situations			wide range of practitioners. Has been opened up to West Berkshire and Wokingham and has been promoted.	G	control
	b)	Ensure Domestic Abuse awareness training and safeguarding training cross reference.	Learning and Development Subgroup	May 2017	Consistent training standards for Level 1 have been agreed and produced.	G	Consistent training standards for Level 1 produced.
	c)	Promote good record keeping	Learning and Development Subgroup	Sept 2017	Record keeping is embedded across all safeguarding training standards. Issue to be raised at trainer meeting 25 May. Promote tools and training resources via Board's website and Briefing. Review results of case file audit peer review in August to confirm whether there is still	G	Case file audit peer review in August and February reveals improvement in recording skills.

				an issue. To be addressed through supervision.	G	
d)	Deliver Safeguarding Adults Train the Trainer programme (Wokingham BC deliver, open across the area)	Learning and Development Subgroup	April 2017	Course delivered; 8 attendees.	G	Course offered across West of Berkshire with positive evaluation response
e)	Joint Children's and Adults Safeguarding Conference on theme of Mental Health	Learning and Development Subgroup	23 Sep 2017	Conference took place as planned. Feedback is currently being evaluated.	G	140 attendees with at least 80% of delegates rating the event as good or excellent
f)	Establish programme of Safeguarding Bite Size Workshops for multi-agency professionals	Learning and Development Subgroup	March 2017	SAR Findings workshop took place in Sept; further workshops planned: Jan- Advocacy March - Allegations management.	G	Workshops attended by wide range of professionals
g)	Deliver core training programmes at all levels to support the sector. Seek assurance that all SAB members deliver Level 1 to the	Learning and Development Subgroup	Ongoing		G	Training programmes delivered and evaluated.

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	agreed standards. Measure the impact of training on a biannual basis				**G**	
	h) Report on training activity for 2016-17 for SAB annual report	Learning and Development Subgroup	May 2017	Complete.	**G**	Training data collated and reviewed
	i) Review and update the Workforce Development Strategy	Learning and Development Subgroup	Dec 2017	Complete.	**G**	Updated Strategy published on SAB website
3.2 Learning from SARs and other reviews has been shared and used to improve practice	a) The SAR Learning Monitoring Tool is used to monitor response to findings by partner agencies upon publication of SARs.	Effectiveness Subgroup	June 2017 and ongoing	Populated with information from Mrs H and Mr I.	**G**	The SAR Learning Monitoring Tool is completed and presented to the Board quarterly showing that learning from SARs is embedded within partner agencies.
	b) Multi-agency thematic audits to evaluate to what extent learning from SARs has been embedded. Priority areas for 2017 thematic audits agreed as: tissue viability, abuse in own home, dementia.	Oversight and Quality / Effectiveness Subgroup	Dec 2017	Dementia audit complete and report due presented to Board in June. Tissue Viability Audit	**R**	Results of thematic audits are published and areas for development are identified for the Board to take appropriate action.

				presented to SAB. Carried over to 18/21 Business Plan – Ref 1.80		
	c) Evaluation template for training to include question to evaluate how practitioners have taken on and embedded learning	Learning & Development Subgroup	May 2017	Training impact evaluation form agreed for use includes question on applying learning to practice	G	Amended evaluation template used to assess how practitioners have embedded learning

PRIORITY 4 We work together effectively to support people at risk						
Outcome	**Action**	**Lead**	**Timescale**	**Work in progress**	**RAG**	**Success criteria**
4.1 Involvement of advocates and IMCAs ensure person centred responses are promoted	a) Identify where there is a shortfall in the use of advocates and raise staff awareness as to how and when to involve advocates.	Oversight and Quality Subgroup	Dec 2017	Awareness raising article included in April's Board briefing. Bite size learning session planned for January. New	G	New approaches to person centred responses are promoted. Quarterly PI data indicates improvement in use of advocates.

				indicator included in KPI set.	(green)	
4.2 Providers are supported to deliver safe, high quality services and the Board is assured that robust safeguarding processes are adhered to in line with Care Act requirements	a) DASS and other commissioners provide assurance to the Board (through the annual Self-Assessment audit) that robust safeguarding processes are adhered to by commissioned services in line with Care Act requirements.	DASS and other commissioners provide assurance	Jan 2018	Question included in Self-Assessment audit: B2 2/3 LA's assessed as Green 1/3 LA assessed as Amber with an action plan in place to address shortfalls.	G	Board is assured that robust arrangements are in place to support and challenge providers
4.3 We work within a framework of policies and procedures that keep people safe	a) Organisations have in place policies and processes to manage allegations against persons in position of trust	Task and Finish Group	Sept 2017	Draft Framework for the *Management of Allegations against Persons in Position of Trust* endorsed by Board in September. Under consideration by the Berkshire Policy and Procedures group for inclusion in the P&P. Carried over to 18/21	A	Board is assured that partner agencies have robust policy in place to manage allegations

				Business Plan – Ref 1.37		
	b) Promote e-learning Safe Recruitment module	Learning and Development Subgroup	July 2017	Promoted in January 2018 Boards Briefing	G	e-learning Safe Recruitment module is promoted and used by practitioners
4.4. We provide feedback to people who raised a safeguarding concern	a) Each Local Authority to provide quarterly performance data on the proportion of concerns where feedback was provided to the referrer.	Oversight and Quality Subgroup / Effectiveness Subgroup	Sept 2017	Indicator included in KPI set for Q3 and 4 data	G	Board is assured that feedback is provided to the referrer and takes actions to ensure practice is improved
4.5 We are assured that local arrangements to support and minimise risks for people who self-neglect are effective	a) Raise awareness of the issues and improve practice for working with those who self-neglect	Learning and Development Subgroup Business Manager	Sept 2017 June 2017	Workshop included in Conference programme and embedded in training standards Link to the Hoarding film produced by Birmingham SAB via Youtube to be included on Board's website and promoted in Board's Briefing	G	Raise awareness of self-neglect through website and workshop

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	b) Review undertaken to inform the Board of prevalence of self-neglect cases reported under safeguarding framework, and outcomes for the individual	Effectiveness Subgroup	Sept 2017	External resources commissioned to undertake review, due to be presented at the Board in September 2018 Carried over to 18/21Business Plan – Ref 1.38-1.40	A	The Board understands how cases of self-neglect are responded to and identifies areas for further development
	c) Partner agencies have clear policies and procedures in place to manage complex cases and support those who self-neglect or choose not to engage, in line with MSP and Duty of Care	Partner agencies	Jan 2018	Wording amended in section B1 of self-assessment audit template. To be incorporated in external review 4.5b. Carried over to 18/21 Business Plan – Ref 1.38-1.40	A	Board is assured that each agency has clear policies and procedures to manage complex cases
4.6 Practitioners understand and can apply the MCA consistently in practice (including consent, best	a) MCA focused week of workshops for practitioners	Effectiveness / Learning and Development / Communication	October 2017	Funding confirmed. Workshops scheduled for week of 16 Oct.	G	MCA focused week of workshops attended by practitioners

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		Subgroups				G	
interest, DoLS and restraint)							
4.7 We are assured that local arrangements to support people who have Mental Health issues are effective	a) Raise awareness of current governance structures and accountability for mental health in the locality	Independent Chair	June 2017	Presentation at September Board meeting; mental health subgroups asked to consider safeguarding issues and escalation processes; results feedback at December Board meeting.		G	Partner agencies have clarity about current governance structures for mental health
4.8 We are assured that local arrangements to support and minimise risks for people who experience Domestic Abuse	a) Event on Domestic Abuse for partners to explore issues, understand priorities of each Domestic Abuse Strategy and identify gaps.	Independent Chair / Business Manager	Feb 2017	Carried over to 18/21 Business Plan – Ref 1.24		R	The Board is assured that commissioned DA services in each area are effective.
	b) A&E data shared to help each LA identify hotspots in their area and triangulate information	Oversight and Quality Subgroup	Oct 2017	Carried over to 18/21 Business Plan – Ref 1.23		R	Data shared to inform Board's understanding of DA
4.9 We have a Modern Slavery strategic	a) Modern Slavery strategic pathway agreed and	Policy and Procedures	Dec 2017	Carried over to 18/21 Business Plan – Ref		R	Modern Slavery strategic pathway agreed and

pathway in place	published	Subgroup		3.33	■	published
	b) Review and promote modern slavery e-learning	Learning and Development Subgroup	Dec 2017	E-learning module available to all LA's, who are able to share e learning tools with partners.	A	Modern slavery e-learning reviewed and promoted

RAG Status

There are a number of actions in this Business Plan that are Red and Amber. Progress has not been made as expected due to a significant number of staff changes in partner organisations in Quarter 4, and the absence of a Safeguarding Adults Board Business Manager from January 2018 until June 2018. Membership of the Board and Subgroups is under review and outstanding actions will be brought over to the 2018/21 Business Plan.