

Priority 1 - We will continue to work on outstanding actions from the 2019/20 from the following priorities:

- Priority 1 2019-20, We will provide the partnership with the tools and framework to work effectively with people who Self-Neglect
- Priority 2 2019 -20, The SAB will work collaboratively with Local Safeguarding Children Boards, Community Safety Partnerships and Health and Wellbeing Boards to provide the workforce with the frameworks and tools to work with Vulnerable Adults who are at risk of Domestic Abuse.
- Priority 3 2019-20, We will understand the main risks to our local population in regard to Targeted Exploitation and agree how best to equip the partnership to Safeguard vulnerable people against these risks.
- Priority 4 2019- 20, The SAB will understand from key stakeholders, why there has been an increase in organisational safeguarding and seek assurance from commissioners, that there are adequate preventative measures in place that is consistent across the partnership where practical.

| Action | Outcome | Who | Target Date | RAG and Progress Update |
|---|---|--------------|----------------|--|
| To continue to implement a Service User Involvement Strategy for the SAB. | People who use services are able to influence the work of the SAB | VSC Subgroup | March 2021 | PART MET The strategy was approved by the SAB in June 2019. Parts of the strategy have been implemented, but full implementation is required. Due to the pandemic Community Questionnaires will be put on hold. Agreed at VCS & Healthwatch Subgroup that the discussions and information sharing that occurs at this meeting provides a service user voice, as there are limitations around engagement at this time due to the pandemic. |



| | | | | SAB Agreed December 2020, that RAG status of this action is Amber. |
|------------------------------------|--|-----------------|---------|--|
| Review safeguarding management | The SAB are assured that there is sufficient | Pan Berkshire | Decemb | Completed |
| oversight and consider updating | management oversight in regards to | Policy and | er 2020 | A best practice SAM function document has been created, titled |
| the function of 'Safeguarding | safeguarding. There is a decision by the SAB | Procedure | C. 2020 | Pan Berkshire Policy and Procedure Best Practice Guide for |
| Adults Management' across the | on the 'SAM' function in Local Authorities | Subgroup | | Decision-making: S42 Safeguarding Adults Enquiries. Which was |
| Partnership. | and this is implemented. | a single sup | | endorsed and published by the Pan Berkshire Policy and |
| · | · | | | Procedure subgroup in May 21. |
| The SAB review the quality of | The SAB are assured that there is adequate | Learning & | Decemb | Completed |
| Tissue Viability Management | training in pressure care across the | Development | er 2020 | Report endorsed by SAB in September 2020, recommendations |
| training across the partnership to | partnership. | | | from report have been added to the Learning from SAR/Audit |
| ensure that it is adequately | | | | Implementation Plan. |
| addressed. | | | | |
| The SAB are assured that there is | Awareness around pressure care improves | Communicatio | March | Completed |
| good quality pressure care | so that people are better equipped to | n and Publicity | 2021 | Identified through the review of Tissue Viability training that |
| information in regards for the | identify risks and seek appropriate support. | Subgroup | | pressure care awareness is required. |
| public. | | | | |
| | | | | Information on the worldwide stop the pressure day was shared |
| | | | | with the partnership via the October 2020 SAB Newsletter and by |
| | | | | email signature. |
| | | | | |
| | | | | Learning from P SAR has identified opportunities to develop |
| | | | | information on pressure care for service users and their families. |
| | | | | Self-Neglect 5 minute awareness document distributed to SAB |
| | | | | partnership in December 2020, covered pressure care. |
| | | | | partifership in December 2020, covered pressure care. |
| | | | | In early 21, Safeguarding Leads meeting reviewed the figures in |
| | | | | regard to pressure care during the pandemic, it was agreed that |
| | | | | there had not be any spike in concerns and that individual |
| | | | | agencies will promote pressure care. |



| To review targeted exploitation paper, agree how the SAB will address the issues identified. | There is a clear plan on how to support those most at risk from targeted exploitation. | SAB | Decemb er 2020 | Completed Report endorsed by SAB in September 2020, recommendations from report have been added to the Learning from SAR/Audit Implementation Plan. |
|---|--|--|-------------------|---|
| Understand the risks facing provider services that relate to safeguarding and ensure that there are adequate plans in place to mitigate these risks | Organisational safeguarding policies and procedures are correct and followed Contract and quality monitoring is consistent and effective across the partnership Relationship with providers are establish so they have a 'voice at the Board' and feed into business planning Recommendations from SARS in relation to organisational safeguarding are implemented The SAB are clear on the roles of the ICP's and ICS's regarding this priority | Task and Finish Group led by SAB Independent Chair | March 2021 | Not completed in 20/21, the SAB will consider as a priority for 21 onwards. |

| Priority 2 – The SAB will seek to understand the impact the pandemic has had on Adult Safeguarding locally. | | | | | |
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| Action | Outcome | Who | Target | RAG and Progress Update | |
| | | | Date | | |
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| Oversee the delivery of safeguarding training across the partnership to ensure that it is being delivered appropriately given the current circumstances. The SAB will review the findings | The SAB have a clear understanding on the level of safeguarding training that is being delivered during the pandemic. There is an understanding from data | Learning & Development Business | March 2021 | Completed Report to SAB in June 2021. Completed |
|---|--|---|-------------------|---|
| from the ADASS/LGA Insight Project. | analysis how the pandemic impacted on safeguarding locally and how West Berkshire compares with other areas. | Manager will provide analysis for the SAB | er 2020 | Discussed at December 2020 SAB. |
| SAB Meeting to focus on Safeguarding people at risk of multiple exclusion. To agree how to address the concerns about individuals who do not meet safeguarding or care management pathways. | There are appropriate pathways in place to safeguard those individuals who are at risk of multiple exclusion from care management or safeguarding pathways so that risks are managed wherever possible. | SAB | Decemb er 2020 | RED Not completed in 20/21, the SAB will consider as a priority for 21 onwards |
| SAB will monitor safeguarding processes during the pandemic with regular questions answered by statutory partners safeguarding leads. | The SAB have assurance from statutory partners that Safeguarding practices have been effective during the pandemic. So that the SAB know: How safeguarding interventions have continued during pandemic? What the challenges are to safeguarding interventions and how these have been overcome. How partners are assured that safeguarding interventions have been appropriate. Highlight any concerns. | Safeguarding Leads Subgroup | Ongoing | Completed Reported to September 20, December 20 and March 21 SAB. |



| | How partners are supporting staff with their wellbeing. | | | |
|--|---|--------------|-------------------|---|
| Understand the impact the pandemic has had on carers and | The SAB are aware of the impact the pandemic has had on carers and has a plan | VCS Subgroup | Decemb er 2020 | Completed Report presented to SAB in December 2020 for consideration. |
| agree an approach to mitigate identified safeguarding risks. | in place to address the identified safeguarding risks. | | | |
| Seek assurance that revised | Patient safety is a priority within hospital | SAB | Decemb | Completed |
| hospital discharge pathways in | discharge, where unsafe discharges have | | er 2020 | December SAB 2020 confirmed that KPI's are in place to monitor |
| response to the pandemic, address | been identified, lessons are learnt and | | | safeguarding in hospital discharge. |
| safeguarding appropriately. | implemented. | | | |
| | | | | Safeguarding Leads update Feb 21: Hospital discharge – meeting |
| | | | | took place with representatives from RBFT, BHFT and the CCG to |
| | | | | look at how hospital discharge concerns are monitored. |
| SAB reflect on the ethnicity | Have an understanding on the | P&Q Subgroup | March | RED |
| inequalities highlighted by the | disproportionate impact the pandemic has | | 2021 | Not completed in 20/21, the SAB will consider as a priority for 21 |
| pandemic and how this impact on | had on communities and what learning can | | | onwards |
| Safeguarding. | be taken in regard to safeguarding. | | | |

| Priority 3 – The SAB will continue to carry out the following business as usual tasks in order to comply with its statutory obligations. | | | | | | |
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| Action | Outcome | Who | Target | RAG and Progress Update | | |
| | | | Date | | | |
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| Publish a SAB newsletter on a 3- | Communication between the SAB and | SAB Business | Ongoing | Completed | | |
| monthly basis. | agencies improved and learning in regard | Manager | | Newsletter published in October 2020 and January 2021. | | |
| , | to safeguarding is disseminated. | | | | | |



| | | | | Practice learning notes from SARS 6 have been published in 20/21. Self-Neglect 5 minute awareness document distributed to SAB partnership in December 2020. |
|--|---|---|-------------------|--|
| Publish SAB Annual Report for 2019/20 | SAB Annual report is published as per its statutory requirements. | SAB | January 2021 | Completed Report published Jan 2021. |
| Re-establish S42 Audits across the Local Authorities. | LA's are completing S42 audits and peer review audits are being completed as per the SAB Quality Assurance Framework. | Local Authorities/ Performance & Quality Subgroup | Decemb er 2020 | RED Not completed in 20/21, the SAB will consider as a priority for 21 onwards |
| Complete SARS as per statutory requirements. | SARS are completed as per Care Act requirements that promotes learning. | SAR Panel | Ongoing | Completed SARs are being completed as required by the Care Act, however SARS are not being completed in the six month timescale specified in our policies and procedures. |
| Task and Finish Group to agree actions for the SAB from the recommendations for Michelle | The SAB have a clear plan to address the recommendations within the Michelle SAR. | Task and Finish Group | Februar y 2021 | RED Not completed in 20/21, the SAB will consider as a priority for 21 onwards |
| Learning from SAR/Audit implementation Plan | All recommendations from SARS and audits are added to the Implementation plan and tracked by the SAB | All | Ongoing | Completed A highlight report will be submitted to each SAB. The plan is split into themes, each SAB will focus on a theme from the plan. |
| SAB ToR to be reviewed and updated as appropriate. | Up to date ToR in place. | Business Manager/SAB | Decemb er 2020 | Completed Endorsed by SAB and published on SAB Website December 2020. |
| Dashboard in place to understand safeguarding activity across the partnership. | Dashboard presented to the SAB in a quarterly basis. | Performance & Quality Subgroup | Ongoing | Completed |



| SAB Quality Assurance Framework | The SAB has an effective quality assurance | Business | Decemb | Part Met |
|-------------------------------------|--|--------------|---------|--|
| to be reviewed and changes | process in place that provides assurance to | Manager/ | er 2020 | Focus QAF Meeting held with SAB in December 20 to review QAF |
| implemented. | the SAB in regard to safeguarding across | Performance | | and consider capacity to deliver, the SAB will consider as a |
| | the partnership. | & Quality | | priority for 21 onwards |
| | | Subgroup | | |
| Maintain and improve SAB Website | The SAB has an up to date and useful | Business | Ongoing | Completed |
| | website. | Manager | | Website regularly updated and a Covid specific page created. |
| Bitesize learning sessions are | Bitesize learning sessions are focused on | Learning and | Ongoing | Part Met |
| conducted on a quarterly basis. | key themes identified through SAR | Development | | L&D Subgroup postponed due to pandemic so bitesize sessions |
| | Learning. | Subgroup | | could not be delivered on a quarterly basis. |
| | | | | Held a virtual session on Financial Abuse in November 2020 |
| | | | | with over 80 delegates. |
| | | | | Hoarding training for care workers took place in October |
| | | | | 2020 |
| | | | | Delays to future subgroups as L&D subgroup meeting in February |
| | | | | 21 did not take place due to the pandemic. |
| Agree and publish safeguarding | There is a clear escalation process that can | Safeguarding | Decemb | Not Met |
| escalation plan for the partnership | be used if there are any blockages in the | Leads | er 2020 | NFA taken at this time due to the Pandemic. Paper on concerns |
| | safeguarding process. | Subgroup | | raised by the VCS and Healthwatch Subgroup on SAB agenda for |
| | | | | March 21. |

| RAG Criteria | RAG Status | Scenario | Boards Responsibility |
|--------------|------------|--|---|
| | Red | The implementation plan is not in place or there are delays which mean | To understand issues impacts on action and agree how to |
| | Reu | the action will not be achieved in timescale. | mitigate the risk, by using risk mitigation log. |



| Progress | Progress Amber not be met. | The implementation plan is in place there is a risk that the deadline will not be met. | To Note |
|--------------------------|----------------------------|--|---------|
| against Business Plan | Green/Completed | The action has been completed or there is an implementation plan in place and the timescale is expected to be met. | To Note |

Amendments to the Business Plan

Alongside this Business plan the Board also hold a risk and mitigation log and learning from SAR/Audit Implementation plan. In order to ensure that the plan is reflective of current priorities and incorporates ongoing learning, amendments will be made to the business plan. Any amendments will be approved by the Board.

Please note that due to the pandemic, the Business Plan has been set for a six-month period only and will focus on specific tasks based on outstanding actions from the 2019/20 Business Plan and learning from SARS, in order to allow time for the SAB to understand the impact the pandemic has on safeguarding allow for priorities to be set as appropriate.

Future actions

Due to the pandemic and the impact this has on capacity across the partnership the following actions have been deferred and will be considered for the 21/22 Business Plan.

| Action | Outcome | Who | Target | RAG and Progress Update |
|--|---|---------------------|--------|--|
| | | | Date | |
| To review the effectiveness of the Multi- Agency Risk Assessment | There is a standardised approach to risk management across the partnership and it | Performanc e and | ТВС | Safeguarding Leads were asked to keep track of MARM's when implemented in July 2020. |
| Framework (MARM), introduced by | is effective. | Quality | | |
| the SAB in July 2020. | | Subgroup | | |
| Review and update Safeguarding | Safeguarding Training to be reviewed to | Learning & | TBC | Proposal has been approved by SAB, implementation is required. |
| Training across the partnership. | ensure that it addresses SAB Priorities. | Developme | | |
| | | nt | | |
| Independent audit into | The SAB will understand why | Performanc | TBC | Was an action set out by the SAB in the 18/19 Annual report |
| safeguarding recording processes | safeguarding data is inconsistent across | e and | | however due to the pandemic the results from an audit would not |
| across Local Authorities, to | the partnership and why local trends | Quality | | be reflective of everyday practice and therefore it has been agreed |
| identify and resolve | differ from national trends. | Subgroup | | that this piece of work would be undertaken after the pandemic. |
| inconstancies. | | | | |

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| Ī | To review Website hosting | To ensure that the SAB have a useful and | TBC | TBC | Agreed a SAB in December 2020, that the hosting arrangements |
|---|---------------------------|--|-----|-----|--|
| | arrangements. | cost effective website. | | | will be reviewed when capacity allows. |