A close-up of a logo

Description automatically generated A logo for a family care company

Description automatically generated A logo of a person with their arms up

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**4 Local Safeguarding Adults Boards (4LSAB)**

**Safeguarding Self Audit Tool**

**January 2024**

**Guidance notes:**

The Safeguarding Adults Boards in Hampshire, Isle of Wight, Portsmouth and Southampton (4LSAB) have developed a shared Safeguarding Self-Audit Tool which is designed to enable respective Boards to fulfil their remit of ensuring local safeguarding arrangements are both effective and also deliver the outcomes that people want.

Local agencies are asked to undertake the Self-Audit to help them evaluate the effectiveness of their internal safeguarding arrangements and to identify and prioritise any areas needing further development. The Self-Audit will be completed on a bi-annual basis and this approach supports the 4LSAB in its governance and remit of holding local agencies to account for their safeguarding work. This is a facilitative process to support continuous improvement and the data that is collected will be shared at the respective boards and included in each area's annual report. Areas of generic learning and thematic findings will be identified and used to inform the LSAB’s strategic development of safeguarding for its area.

To complete the Self-Audit, partner organisations are asked to:

* answer all the questions under each of the headings (relevant links are highlighted in blue)
* assign a RAG (Red, Amber or Green) status to that area (see key below)

The comments section should include evidence to support the rating given including adding any further improvement actions identified in the final column.

As this is a generic tool, not all areas in the self-audit will be applicable to individual organisations. Where this is the case, please state ‘not applicable’ in the comments section providing the rationale for this response. In order to avoid duplication, organisations which link to more than one LSAB will only have to complete the Self Audit once as this will be shared with the other Boards.

Partner organisations are asked to complete the Self Audit electronically and to return completed forms by **28th March 2024.** Any queries should be directed to the manager of your Local Safeguarding Adults Board.

|  |  |  |
| --- | --- | --- |
| Red rating (Inadequate)  Your organisation does not meet this requirement. | Amber rating (Requires Improvement)  Your requirement is met in part; there may be both good areas and areas for improvement. | Green rating (Good)  Your organisation meets the requirement consistently across it. |

**Example:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Evidence and improvement actions required**  **(Please provide a rationale for any areas considered ‘not applicable’)** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| 1a. A senior, executive manager has been designated as the organisation’s strategic lead and is accountable for adult safeguarding. | John Smith, Chief Executive, is the Safeguarding Adults Lead he is responsible for oversight of adult safeguarding policy. |  |  |  | We are currently recruiting an adult safeguarding lead to deputise for John due to system pressures. |

**4LSAB Safeguarding Self Audit Tool**

**Your organisation:**

|  |  |  |
| --- | --- | --- |
| **Your name:** | **Your role:** | **Name of senior manager:** |
| **Senior Manager role:** | **Signature of senior manager:** | **Date signed off:** |

|  |  |  |  |  |  |
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|  | **Evidence and improvement actions required**  **(Please provide a rationale for any areas considered ‘not applicable’)** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| 1. **Leadership, management and accountability** |  |  |  |  |  |
| 1a. A senior, executive manager has been designated as the organisation’s strategic lead and is accountable for adult safeguarding. |  |  |  |  |  |
| 1b. The organisation has aligned relevant corporate, strategic, and operational plans, policies, and programmes to ensure the safeguarding of their service users/customers. |  |  |  |  |  |
| 1c. The organisation has a whistle blowing policy. Staff and volunteers are aware of the policy and how to raise concerns. |  |  |  |  |  |
| 1d. [Safeguarding roles](https://www.hampshiresab.org.uk/new-4lsab-guidance-on-safer-recruitment/), responsibilities and duties are embedded within job descriptions, policies, and standard operating procedures. |  |  |  |  |  |
| 1e. Staff receive regular supervision on their safeguarding case work, promoting [professional curiosity](https://www.hampshiresab.org.uk/new-4lsab-guidance-on-safer-recruitment/). Opportunities are available for debriefing and reflective practice. |  |  |  |  |  |
| 1f. Managers understand their responsibilities for managing allegations against people in positions of trust. There is a [4LSAB procedure](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-Guidance-on-Managing-Allegations-Against-People-in-a-Position-of-Trust-2020-1.pdf) to support this.   * Is there a named senior officer with responsibility in respect of complaints and allegations against staff? * Do you have a Safeguarding Allegations Management Advisor (SAMA)? * Does your organisation have a process in place for managing allegations against staff? |  |  |  |  |  |
| 1g. Managers are aware of the how to escalate Safeguarding concerns in line with the [4LSAB escalation protocol](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-Multi-Agency-Escalation-Protocol-June-2023.pdf). |  |  |  |  |  |
| 1h. Data is routinely collected on the following aspects of safeguarding activity:   * No. of concerns raised with the local authority * No. of concerns received about its service in relation to safeguarding * No of allegations about people in a position of trust |  |  |  |  |  |
| 1i. Does your safeguarding Policy include a definition of [organisational abuse](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-Large-Scale-S42-Safeguarding-Enquiry-Protocol-January-2023.pdf) and information on how to respond when concerns are raised? |  |  |  |  |  |
| 1j. How does your organisation gain assurance that new or updated 4LSAB guidance is applied within your organisation? |  |  |  |  |  |
| 1k. How does your organisation gain assurance about the quality of the safeguarding concerns raised to the local authority? |  |  |  |  |  |
|  | **Evidence and improvement actions required**  **(Please provide a rationale for any areas considered ‘not applicable’ )** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| **2. Staff responsibilities** |  |  |  |  |  |
| 2a. All staff and volunteers are able to identify indicators of abuse or neglect and know how to report concerns in line with the [4LSAB Safeguarding Concerns Guidance](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-Safeguarding-Concerns-Guidance-Oct-2020-1.pdf). |  |  |  |  |  |
| 2b. Managing Risk   1. All staff and volunteers understand the [4LSAB Multi Agency Risk Management Framework](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-MARM-Multi-Agency-Risk-Management-Framework-June-2023-Final.pdf) and how to initiate and engage in the process. 2. Staff are able to identify the difference between when to raise a safeguarding concern to the Local Authority and when to use a MARM to manage risk. |  |  |  |  |  |
| 2c. Unpaid Carers/Helpers   1. Are staff able to identify unpaid carers/helpers? 2. Do staff know that they can refer carers into the Local Authority for a Section 10 carers assessment? 3. Would staff feel confident in raising a safeguarding concern to the Local Authority if they had concerns for the person providing the help/care? |  |  |  |  |  |
|  | **Evidence and improvement actions required**  **(Please provide a rationale for any areas considered ‘not applicable’ )** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| **3 Safer recruitment** |  |  |  |  |  |
| 3a. Safe working arrangements are in place which includes robust recruitment and selection, DBS checks, timely use of competency frameworks and disciplinary procedures, timely referrals to the DBS and professional registration bodies, etc. |  |  |  |  |  |
| 3b. Does your recruitment process comply with the [4LSAB safer recruitment policy](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-Safer-Recruitment-Guidance-June-2023-vFINAL.pdf)? |  |  |  |  |  |
|  | **Evidence and improvement actions required**  **(Please provide a rationale for any areas considered ‘not applicable’ )** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| **4 Learning and development** |  |  |  |  |  |
| 4a.   1. All staff receive the appropriate level of safeguarding training 2. Onboarding of new staff includes safeguarding training as part of staff induction 3. Continuous audit and monitoring are in place to ensure safeguarding training remains up to date |  |  |  |  |  |
| 4b.   1. Are you aware of the purpose of a [Safeguarding Adults Review (SAR)](https://www.hampshiresab.org.uk/safeguarding-adult-reviews/) and your statutory duty to refer to the Adults Board? 2. Is there awareness within your organisation of your statutory duty to engage with the SAR process as per section 44/45 of the Care Act 2014? 3. We are aware of learning from SARs and ensure we disseminate learning to staff. 4. Learning is embedded from SARs as well as other learning or review activity, including audits. Understanding that Boards will seek assurance that this is in place. |  |  |  |  |  |
| 4c.   1. Are you confident in the application of the [4LSAB Family Approach Guidance](https://www.hampshirescp.org.uk/professionals/toolkits/adopting-a-family-approach-joint-toolkit/) and the important links this highlights in relation to safeguarding concerns for the whole family? 2. Are you aware that there is a different pathway, threshold and legal framework for raising safeguarding concerns for children 0-17 and adults 18+? |  |  |  |  |  |
| 4d.   1. Does your organisation have assurance on the use of the [4LSAB Fire Safety framework](https://www.hampshiresab.org.uk/wp-content/uploads/Multi-Agency-Fire-Safety-Framework-May-2021.pdf), including recognising the link between increased vulnerability factors and increased fire risk? 2. Is your organisation confident in making [safe and well referrals](https://www.hantsfire.gov.uk/safety/home-safe-home/safe-and-well/safe-well-visit-referral/)? |  |  |  |  |  |
| 4e.   1. Do you have the appropriate plans, policies and training in place to identify and continue safeguarding support during transition into adulthood in line with [4LSAB Multi Agency Framework for managing risk and safeguarding people moving into adulthood.](https://www.hampshiresab.org.uk/wp-content/uploads/4LSAB-Framework-for-managing-risk-and-safeguarding-people-moving-into-adulthood-May-2022.pdf) |  |  |  |  |  |
| 4f.   1. Does your organisation provide training on working with those who are displaying alcohol dependent behaviours ie self neglect? 2. Do staff have the skills, knowledge and confidence to recognise and sign post for Alcohol dependency and acknowledge the challenges associated with it? |  |  |  |  |  |
|  | **Evidence and improvement actions required**  **(Please provide a rationale for any areas considered ‘not applicable’ )** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| **5 Emergency response** |  |  |  |  |  |
| A business continuity plan is in place to ensure that the service is able to maintain a safe level of safeguarding response at time of peak operational pressure. |  |  |  |  |  |
|  | **Evidence and further actions required**  **(Please provide a rationale for any areas considered ‘not applicable’)** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| **6. Mental Capacity Act (MCA)** |  |  |  |  |  |
| 6a. What assurance can you provide that your organisation ensures that all staff understand their legal, professional and organisational duties relating to [MCA](https://www.hampshiresab.org.uk/wp-content/uploads/One-Minute-Guide-to-the-Mental-Capacity-Act-2005.pdf)? |  |  |  |  |  |
| 6b. Where required are staff competent to carry out MCA assessments and make/coordinate best interest decisions? |  |  |  |  |  |
| 6c. Where required do staff have the skills to assess executive capacity? |  |  |  |  |  |
|  | **Evidence and further actions required**  **(Please provide a rationale for any areas considered ‘not applicable’ )** | **Green** | **Amber** | **Red** | **If Amber or Red what action will be taken?** |
| **7. Making Safeguarding Personal** |  |  |  |  |  |
| 7a. Mechanisms and information are in place to enable service users, relatives, and visitors to raise safeguarding concerns to your organisation. |  |  |  |  |  |
| 7b. Service users:   1. are involved in decision making about safeguarding, including their wishes and desired outcomes in accordance with the principles of [making safeguarding personal](https://www.hampshiresab.org.uk/wp-content/uploads/One-Minute-Guide-to-Making-Safeguarding-Personal.pdf). 2. are offered the opportunity to participate in safeguarding and MARM meetings as appropriate; and 3. have adjustments made to accommodate this. |  |  |  |  |  |
| 7c. Advocacy   1. Does your agency understand the different types of [advocacy](https://www.hampshiresab.org.uk/wp-content/uploads/One-Minute-Guide-to-Advocacy-1.pdf) and the responsibility to refer? 2. Are staff confident how to refer into advocacy providers? |  |  |  |  |  |
| 7d. Feedback is routinely sought from the adult or their representative following safeguarding support which is used to improve practice, service delivery and outcomes. |  |  |  |  |  |